

BRISTOL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
I.	<u>ASSETS</u>				
A.	<u>Current Assets:</u>				
1	Cash and Cash Equivalents	\$4,272,881	\$9,376,449	\$5,103,568	119%
2	Short Term Investments	\$96,343	\$96,452	\$109	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$20,427,829	\$16,562,143	(\$3,865,686)	-19%
4	Current Assets Whose Use is Limited for Current Liabilities	\$462,954	\$458,932	(\$4,022)	-1%
5	Due From Affiliates	\$2,258,921	\$3,142,097	\$883,176	39%
6	Due From Third Party Payers	\$2,379,937	\$1,964,075	(\$415,862)	-17%
7	Inventories of Supplies	\$1,696,559	\$1,592,222	(\$104,337)	-6%
8	Prepaid Expenses	\$467,593	\$811,642	\$344,049	74%
9	Other Current Assets	\$677,818	\$4,999,472	\$4,321,654	638%
	Total Current Assets	\$32,740,835	\$39,003,484	\$6,262,649	19%
B.	<u>Noncurrent Assets Whose Use is Limited:</u>				
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$5,602,380	\$6,662,023	\$1,059,643	19%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$12,050,699	\$12,919,018	\$868,319	7%
	Total Noncurrent Assets Whose Use is Limited:	\$17,653,079	\$19,581,041	\$1,927,962	11%
5	Interest in Net Assets of Foundation	\$4,332,419	\$6,708,565	\$2,376,146	55%
6	Long Term Investments	\$6,015,999	\$7,231,860	\$1,215,861	20%
7	Other Noncurrent Assets	\$2,353,151	\$2,364,559	\$11,408	0%
C.	<u>Net Fixed Assets:</u>				
1	Property, Plant and Equipment	\$139,095,619	\$141,381,699	\$2,286,080	2%
2	Less: Accumulated Depreciation	\$99,185,736	\$105,453,829	\$6,268,093	6%
	Property, Plant and Equipment, Net	\$39,909,883	\$35,927,870	(\$3,982,013)	-10%
3	Construction in Progress	\$120,375	\$1,836,659	\$1,716,284	1426%
	Total Net Fixed Assets	\$40,030,258	\$37,764,529	(\$2,265,729)	-6%
	Total Assets	\$103,125,741	\$112,654,038	\$9,528,297	9%

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		FY 2011	FY 2012	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$11,772,566	\$9,975,800	(\$1,796,766)	-15%
2	Salaries, Wages and Payroll Taxes	\$11,466,850	\$12,922,514	\$1,455,664	13%
3	Due To Third Party Payers	\$0	\$0	\$0	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$757,385	\$489,222	(\$268,163)	-35%
6	Current Portion of Notes Payable	\$7,444	\$7,826	\$382	5%
7	Other Current Liabilities	\$3,541,944	\$3,375,000	(\$166,944)	-5%
	Total Current Liabilities	\$27,546,189	\$26,770,362	(\$775,827)	-3%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$26,252,085	\$25,729,951	(\$522,134)	-2%
2	Notes Payable (Net of Current Portion)	\$297,963	\$290,135	(\$7,828)	-3%
	Total Long Term Debt	\$26,550,048	\$26,020,086	(\$529,962)	-2%
3	Accrued Pension Liability	\$25,622,329	\$30,446,134	\$4,823,805	19%
4	Other Long Term Liabilities	\$15,391,487	\$18,786,121	\$3,394,634	22%
	Total Long Term Liabilities	\$67,563,864	\$75,252,341	\$7,688,477	11%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$427,122	(\$376,115)	(\$803,237)	-188%
2	Temporarily Restricted Net Assets	\$1,021,495	\$4,079,847	\$3,058,352	299%
3	Permanently Restricted Net Assets	\$6,567,071	\$6,927,603	\$360,532	5%
	Total Net Assets	\$8,015,688	\$10,631,335	\$2,615,647	33%
	Total Liabilities and Net Assets	\$103,125,741	\$112,654,038	\$9,528,297	9%

BRISTOL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$345,045,549	\$385,913,045	\$40,867,496	12%
2	Less: Allowances	\$218,880,779	\$251,770,594	\$32,889,815	15%
3	Less: Charity Care	\$223,751	\$3,781,958	\$3,558,207	1590%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$125,941,019	\$130,360,493	\$4,419,474	4%
5	Other Operating Revenue	\$6,100,777	\$5,173,982	(\$926,795)	-15%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$132,041,796	\$135,534,475	\$3,492,679	3%
B. Operating Expenses:					
1	Salaries and Wages	\$53,091,846	\$54,926,060	\$1,834,214	3%
2	Fringe Benefits	\$15,768,577	\$15,078,189	(\$690,388)	-4%
3	Physicians Fees	\$6,039,122	\$7,870,257	\$1,831,135	30%
4	Supplies and Drugs	\$15,408,234	\$17,934,966	\$2,526,732	16%
5	Depreciation and Amortization	\$5,714,642	\$6,320,576	\$605,934	11%
6	Bad Debts	\$9,847,024	\$6,470,291	(\$3,376,733)	-34%
7	Interest	\$1,833,355	\$1,641,972	(\$191,383)	-10%
8	Malpractice	\$1,107,439	(\$399,676)	(\$1,507,115)	-136%
9	Other Operating Expenses	\$23,084,288	\$24,643,668	\$1,559,380	7%
	Total Operating Expenses	\$131,894,527	\$134,486,303	\$2,591,776	2%
	Income/(Loss) From Operations	\$147,269	\$1,048,172	\$900,903	612%
C. Non-Operating Revenue:					
1	Income from Investments	\$516,585	\$355,214	(\$161,371)	-31%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$1,526,682	\$897,940	(\$628,742)	-41%
	Total Non-Operating Revenue	\$2,043,267	\$1,253,154	(\$790,113)	-39%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$2,190,536	\$2,301,326	\$110,790	5%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$2,190,536	\$2,301,326	\$110,790	5%
	Principal Payments	\$789,832	\$797,743	\$7,911	1%

BRISTOL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$60,600,712	\$62,592,371	\$1,991,659	3%
2	MEDICARE MANAGED CARE	\$12,722,226	\$16,525,440	\$3,803,214	30%
3	MEDICAID	\$13,323,161	\$22,132,724	\$8,809,563	66%
4	MEDICAID MANAGED CARE	\$8,184,767	\$1,645,390	(\$6,539,377)	-80%
5	CHAMPUS/TRICARE	\$352,195	\$269,030	(\$83,165)	-24%
6	COMMERCIAL INSURANCE	\$19,569,070	\$21,198,971	\$1,629,901	8%
7	NON-GOVERNMENT MANAGED CARE	\$14,780,152	\$15,385,117	\$604,965	4%
8	WORKER'S COMPENSATION	\$1,302,198	\$1,208,366	(\$93,832)	-7%
9	SELF- PAY/UNINSURED	\$814,154	\$1,720,349	\$906,195	111%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$131,648,635	\$142,677,758	\$11,029,123	8%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$58,428,886	\$69,913,177	\$11,484,291	20%
2	MEDICARE MANAGED CARE	\$15,745,506	\$22,230,841	\$6,485,335	41%
3	MEDICAID	\$23,438,369	\$43,050,338	\$19,611,969	84%
4	MEDICAID MANAGED CARE	\$22,171,679	\$4,976,345	(\$17,195,334)	-78%
5	CHAMPUS/TRICARE	\$666,145	\$537,685	(\$128,460)	-19%
6	COMMERCIAL INSURANCE	\$53,132,267	\$55,408,293	\$2,276,026	4%
7	NON-GOVERNMENT MANAGED CARE	\$30,837,279	\$36,906,213	\$6,068,934	20%
8	WORKER'S COMPENSATION	\$3,828,316	\$4,575,439	\$747,123	20%
9	SELF- PAY/UNINSURED	\$5,148,409	\$5,636,956	\$488,547	9%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$213,396,856	\$243,235,287	\$29,838,431	14%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$119,029,598	\$132,505,548	\$13,475,950	11%
2	MEDICARE MANAGED CARE	\$28,467,732	\$38,756,281	\$10,288,549	36%
3	MEDICAID	\$36,761,530	\$65,183,062	\$28,421,532	77%
4	MEDICAID MANAGED CARE	\$30,356,446	\$6,621,735	(\$23,734,711)	-78%
5	CHAMPUS/TRICARE	\$1,018,340	\$806,715	(\$211,625)	-21%
6	COMMERCIAL INSURANCE	\$72,701,337	\$76,607,264	\$3,905,927	5%
7	NON-GOVERNMENT MANAGED CARE	\$45,617,431	\$52,291,330	\$6,673,899	15%
8	WORKER'S COMPENSATION	\$5,130,514	\$5,783,805	\$653,291	13%
9	SELF- PAY/UNINSURED	\$5,962,563	\$7,357,305	\$1,394,742	23%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$345,045,491	\$385,913,045	\$40,867,554	12%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$24,923,767	\$25,401,334	\$477,567	2%
2	MEDICARE MANAGED CARE	\$4,266,629	\$6,046,789	\$1,780,160	42%
3	MEDICAID	\$4,570,490	\$6,059,905	\$1,489,415	33%
4	MEDICAID MANAGED CARE	\$2,061,734	\$223,772	(\$1,837,962)	-89%
5	CHAMPUS/TRICARE	\$145,385	\$67,500	(\$77,885)	-54%
6	COMMERCIAL INSURANCE	\$7,605,094	\$12,927,217	\$5,322,123	70%
7	NON-GOVERNMENT MANAGED CARE	\$8,078,790	\$9,052,381	\$973,591	12%
8	WORKER'S COMPENSATION	\$1,302,196	\$1,208,365	(\$93,831)	-7%
9	SELF- PAY/UNINSURED	\$20,077	\$13,248	(\$6,829)	-34%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL INPATIENT NET REVENUE	\$52,974,162	\$61,000,511	\$8,026,349	15%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$13,974,418	\$13,327,132	(\$647,286)	-5%
2	MEDICARE MANAGED CARE	\$3,904,884	\$4,635,036	\$730,152	19%
3	MEDICAID	\$6,140,712	\$9,412,836	\$3,272,124	53%
4	MEDICAID MANAGED CARE	\$5,471,971	\$635,338	(\$4,836,633)	-88%
5	CHAMPUS/TRICARE	\$132,563	\$151,700	\$19,137	14%
6	COMMERCIAL INSURANCE	\$22,994,993	\$18,611,186	(\$4,383,807)	-19%
7	NON-GOVERNMENT MANAGED CARE	\$5,975,878	\$11,724,603	\$5,748,725	96%
8	WORKER'S COMPENSATION	\$3,828,315	\$4,575,439	\$747,124	20%
9	SELF- PAY/UNINSURED	\$267,960	\$36,556	(\$231,404)	-86%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$62,691,694	\$63,109,826	\$418,132	1%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$38,898,185	\$38,728,466	(\$169,719)	0%
2	MEDICARE MANAGED CARE	\$8,171,513	\$10,681,825	\$2,510,312	31%
3	MEDICAID	\$10,711,202	\$15,472,741	\$4,761,539	44%
4	MEDICAID MANAGED CARE	\$7,533,705	\$859,110	(\$6,674,595)	-89%
5	CHAMPUS/TRICARE	\$277,948	\$219,200	(\$58,748)	-21%
6	COMMERCIAL INSURANCE	\$30,600,087	\$31,538,403	\$938,316	3%
7	NON-GOVERNMENT MANAGED CARE	\$14,054,668	\$20,776,984	\$6,722,316	48%
8	WORKER'S COMPENSATION	\$5,130,511	\$5,783,804	\$653,293	13%
9	SELF- PAY/UNINSURED	\$288,037	\$49,804	(\$238,233)	-83%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$115,665,856	\$124,110,337	\$8,444,481	7%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	2,787	2,875	88	3%
2	MEDICARE MANAGED CARE	591	690	99	17%
3	MEDICAID	858	1,499	641	75%
4	MEDICAID MANAGED CARE	735	126	(609)	-83%
5	CHAMPUS/TRICARE	25	25	0	0%
6	COMMERCIAL INSURANCE	1,291	1,295	4	0%
7	NON-GOVERNMENT MANAGED CARE	959	905	(54)	-6%
8	WORKER'S COMPENSATION	32	31	(1)	-3%
9	SELF- PAY/UNINSURED	38	119	81	213%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	7,316	7,565	249	3%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	13,091	12,803	(288)	-2%
2	MEDICARE MANAGED CARE	2,559	3,116	557	22%
3	MEDICAID	3,561	5,689	2,128	60%
4	MEDICAID MANAGED CARE	2,092	420	(1,672)	-80%
5	CHAMPUS/TRICARE	81	65	(16)	-20%
6	COMMERCIAL INSURANCE	4,117	3,997	(120)	-3%
7	NON-GOVERNMENT MANAGED CARE	2,952	2,848	(104)	-4%
8	WORKER'S COMPENSATION	60	75	15	25%
9	SELF- PAY/UNINSURED	157	370	213	136%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	28,670	29,383	713	2%
C.	OUTPATIENT VISITS				

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REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	MEDICARE TRADITIONAL	51,621	56,763	5,142	10%
2	MEDICARE MANAGED CARE	9,220	14,543	5,323	58%
3	MEDICAID	20,707	34,953	14,246	69%
4	MEDICAID MANAGED CARE	17,231	4,240	(12,991)	-75%
5	CHAMPUS/TRICARE	589	437	(152)	-26%
6	COMMERCIAL INSURANCE	46,941	44,986	(1,955)	-4%
7	NON-GOVERNMENT MANAGED CARE	27,244	29,964	2,720	10%
8	WORKER'S COMPENSATION	3,382	3,715	333	10%
9	SELF- PAY/UNINSURED	4,549	4,577	28	1%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	181,484	194,178	12,694	7%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$6,333,175	\$5,994,603	(\$338,572)	-5%
2	MEDICARE MANAGED CARE	\$1,323,932	\$1,544,716	\$220,784	17%
3	MEDICAID	\$6,897,105	\$11,395,844	\$4,498,739	65%
4	MEDICAID MANAGED CARE	\$7,652,537	\$1,591,944	(\$6,060,593)	-79%
5	CHAMPUS/TRICARE	\$239,793	\$153,258	(\$86,535)	-36%
6	COMMERCIAL INSURANCE	\$7,737,018	\$6,222,781	(\$1,514,237)	-20%
7	NON-GOVERNMENT MANAGED CARE	\$4,768,653	\$4,283,859	(\$484,794)	-10%
8	WORKER'S COMPENSATION	\$503,591	\$510,541	\$6,950	1%
9	SELF- PAY/UNINSURED	\$2,710,172	\$2,751,561	\$41,389	2%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$38,165,976	\$34,449,107	(\$3,716,869)	-10%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$1,514,703	\$1,142,715	(\$371,988)	-25%
2	MEDICARE MANAGED CARE	\$328,335	\$322,067	(\$6,268)	-2%
3	MEDICAID	\$1,807,000	\$2,491,669	\$684,669	38%
4	MEDICAID MANAGED CARE	\$1,888,646	\$203,246	(\$1,685,400)	-89%
5	CHAMPUS/TRICARE	\$47,719	\$43,240	(\$4,479)	-9%
6	COMMERCIAL INSURANCE	\$3,348,486	\$2,090,180	(\$1,258,306)	-38%
7	NON-GOVERNMENT MANAGED CARE	\$924,105	\$1,360,924	\$436,819	47%
8	WORKER'S COMPENSATION	\$503,591	\$510,541	\$6,950	1%
9	SELF- PAY/UNINSURED	\$141,057	\$17,844	(\$123,213)	-87%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$10,503,642	\$8,182,426	(\$2,321,216)	-22%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	5,422	4,968	(454)	-8%
2	MEDICARE MANAGED CARE	1,197	1,270	73	6%
3	MEDICAID	6,251	11,612	5,361	86%
4	MEDICAID MANAGED CARE	7,585	1,696	(5,889)	-78%
5	CHAMPUS/TRICARE	183	133	(50)	-27%
6	COMMERCIAL INSURANCE	6,297	5,680	(617)	-10%
7	NON-GOVERNMENT MANAGED CARE	3,914	3,892	(22)	-1%
8	WORKER'S COMPENSATION	517	513	(4)	-1%
9	SELF- PAY/UNINSURED	3,131	2,478	(653)	-21%
10	SAGA	0	0	0	0%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	34,497	32,242	(2,255)	-7%

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REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
I.	<u>OPERATING EXPENSE BY CATEGORY</u>				
A.	<u>Salaries & Wages:</u>				
1	Nursing Salaries	\$20,534,294	\$20,544,785	\$10,491	0%
2	Physician Salaries	\$427,269	\$320,735	(\$106,534)	-25%
3	Non-Nursing, Non-Physician Salaries	\$32,130,283	\$34,060,540	\$1,930,257	6%
	Total Salaries & Wages	\$53,091,846	\$54,926,060	\$1,834,214	3%
B.	<u>Fringe Benefits:</u>				
1	Nursing Fringe Benefits	\$6,098,801	\$5,639,912	(\$458,889)	-8%
2	Physician Fringe Benefits	\$126,901	\$88,048	(\$38,853)	-31%
3	Non-Nursing, Non-Physician Fringe Benefits	\$9,542,875	\$9,350,229	(\$192,646)	-2%
	Total Fringe Benefits	\$15,768,577	\$15,078,189	(\$690,388)	-4%
C.	<u>Contractual Labor Fees:</u>				
1	Nursing Fees	\$728,690	\$379,722	(\$348,968)	-48%
2	Physician Fees	\$6,039,122	\$7,870,257	\$1,831,135	30%
3	Non-Nursing, Non-Physician Fees	\$465,603	\$641,547	\$175,944	38%
	Total Contractual Labor Fees	\$7,233,415	\$8,891,526	\$1,658,111	23%
D.	<u>Medical Supplies and Pharmaceutical Cost:</u>				
1	Medical Supplies	\$9,311,049	\$10,584,242	\$1,273,193	14%
2	Pharmaceutical Costs	\$6,097,185	\$7,350,724	\$1,253,539	21%
	Total Medical Supplies and Pharmaceutical Cost	\$15,408,234	\$17,934,966	\$2,526,732	16%
E.	<u>Depreciation and Amortization:</u>				
1	Depreciation-Building	\$2,282,807	\$2,160,045	(\$122,762)	-5%
2	Depreciation-Equipment	\$3,377,134	\$4,105,937	\$728,803	22%
3	Amortization	\$54,701	\$54,594	(\$107)	0%
	Total Depreciation and Amortization	\$5,714,642	\$6,320,576	\$605,934	11%
F.	<u>Bad Debts:</u>				
1	Bad Debts	\$9,847,024	\$6,470,291	(\$3,376,733)	-34%
G.	<u>Interest Expense:</u>				
1	Interest Expense	\$1,833,355	\$1,641,972	(\$191,383)	-10%
H.	<u>Malpractice Insurance Cost:</u>				
1	Malpractice Insurance Cost	\$1,107,439	(\$399,676)	(\$1,507,115)	-136%
I.	<u>Utilities:</u>				
1	Water	\$49,515	\$59,970	\$10,455	21%
2	Natural Gas	\$763,304	\$683,094	(\$80,210)	-11%
3	Oil	\$8,646	\$5,557	(\$3,089)	-36%
4	Electricity	\$1,467,910	\$1,460,795	(\$7,115)	0%
5	Telephone	\$354,329	\$222,485	(\$131,844)	-37%
6	Other Utilities	\$2,188	\$184,311	\$182,123	8324%
	Total Utilities	\$2,645,892	\$2,616,212	(\$29,680)	-1%
J.	<u>Business Expenses:</u>				
1	Accounting Fees	\$101,882	\$152,353	\$50,471	50%
2	Legal Fees	\$539,671	\$756,903	\$217,232	40%
3	Consulting Fees	\$809,556	\$1,226,968	\$417,412	52%
4	Dues and Membership	\$265,871	\$280,608	\$14,737	6%
5	Equipment Leases	\$704,935	\$1,326,236	\$621,301	88%
6	Building Leases	\$915,674	\$905,894	(\$9,780)	-1%
7	Repairs and Maintenance	\$599,137	\$733,462	\$134,325	22%
8	Insurance	\$299,883	\$1,341,717	\$1,041,834	347%

BRISTOL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
9	Travel	\$204,579	\$241,530	\$36,951	18%
10	Conferences	\$6,369	\$1,433	(\$4,936)	-78%
11	Property Tax	\$64,477	\$72,985	\$8,508	13%
12	General Supplies	\$587,611	\$227,699	(\$359,912)	-61%
13	Licenses and Subscriptions	\$79,835	\$588	(\$79,247)	-99%
14	Postage and Shipping	\$128,723	\$179,786	\$51,063	40%
15	Advertising	\$1,230,650	\$851,838	(\$378,812)	-31%
16	Corporate parent/system fees	\$0	\$0	\$0	0%
17	Computer Software	\$0	\$1,723,852	\$1,723,852	0%
18	Computer hardware & small equipment	\$0	\$79,946	\$79,946	0%
19	Dietary / Food Services	\$0	\$694,305	\$694,305	0%
20	Lab Fees / Red Cross charges	\$0	\$2,360,953	\$2,360,953	0%
21	Billing & Collection / Bank Fees	\$0	\$1,177,987	\$1,177,987	0%
22	Recruiting / Employee Education & Recognition	\$0	\$53,159	\$53,159	0%
23	Laundry / Linen	\$0	\$104,050	\$104,050	0%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$0	\$212,486	\$212,486	0%
26	Purchased Services - Medical	\$0	\$371,186	\$371,186	0%
27	Purchased Services - Non Medical	\$0	\$271,857	\$271,857	0%
28	Other Business Expenses	\$12,705,250	\$5,656,406	(\$7,048,844)	-55%
	Total Business Expenses	\$19,244,103	\$21,006,187	\$1,762,084	9%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
	Total Operating Expenses - All Expense Categories*	\$131,894,527	\$134,486,303	\$2,591,776	2%
	*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150				
II.	<u>OPERATING EXPENSE BY DEPARTMENT</u>				
A.	<u>General Services:</u>				
1	General Administration	\$3,076,169	\$3,274,606	\$198,437	6%
2	General Accounting	\$1,448,042	\$1,533,538	\$85,496	6%
3	Patient Billing & Collection	\$2,155,951	\$2,260,372	\$104,421	5%
4	Admitting / Registration Office	\$778,767	\$751,684	(\$27,083)	-3%
5	Data Processing	\$3,646,517	\$4,122,221	\$475,704	13%
6	Communications	\$222,386	\$226,123	\$3,737	2%
7	Personnel	\$966,644	\$749,526	(\$217,118)	-22%
8	Public Relations	\$1,281,955	\$1,201,673	(\$80,282)	-6%
9	Purchasing	\$670,907	\$664,289	(\$6,618)	-1%
10	Dietary and Cafeteria	\$1,630,200	\$1,641,499	\$11,299	1%
11	Housekeeping	\$1,563,822	\$1,580,551	\$16,729	1%
12	Laundry & Linen	\$375,593	\$537,804	\$162,211	43%
13	Operation of Plant	\$2,287,979	\$5,574	(\$2,282,405)	-100%
14	Security	\$397,058	\$390,234	(\$6,824)	-2%
15	Repairs and Maintenance	\$2,467,271	\$4,808,127	\$2,340,856	95%
16	Central Sterile Supply	\$466,471	\$447,642	(\$18,829)	-4%
17	Pharmacy Department	\$7,671,766	\$8,827,328	\$1,155,562	15%
18	Other General Services	\$1,650,244	\$1,440,548	(\$209,696)	-13%
	Total General Services	\$32,757,742	\$34,463,339	\$1,705,597	5%
B.	<u>Professional Services:</u>				
1	Medical Care Administration	\$2,002,193	\$1,885,173	(\$117,020)	-6%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$1,674,165	\$1,668,183	(\$5,982)	0%
4	Medical Records	\$1,862,629	\$1,858,801	(\$3,828)	0%

BRISTOL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2011 ACTUAL</u>	<u>FY 2012 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
5	Social Service	\$893,342	\$1,044,000	\$150,658	17%
6	Other Professional Services	\$196,355	\$216,754	\$20,399	10%
	Total Professional Services	\$6,628,684	\$6,672,911	\$44,227	1%
C.	<u>Special Services:</u>				
1	Operating Room	\$8,202,012	\$7,969,509	(\$232,503)	-3%
2	Recovery Room	\$784,741	\$728,785	(\$55,956)	-7%
3	Anesthesiology	\$154,701	\$293,016	\$138,315	89%
4	Delivery Room	\$0	\$0	\$0	0%
5	Diagnostic Radiology	\$2,769,717	\$3,045,284	\$275,567	10%
6	Diagnostic Ultrasound	\$457,825	\$457,872	\$47	0%
7	Radiation Therapy	\$4,295	\$5,321	\$1,026	24%
8	Radioisotopes	\$625,172	\$512,257	(\$112,915)	-18%
9	CT Scan	\$784,817	\$616,758	(\$168,059)	-21%
10	Laboratory	\$5,029,617	\$7,607,400	\$2,577,783	51%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$660,421	\$617,472	(\$42,949)	-7%
13	Electrocardiology	\$0	\$0	\$0	0%
14	Electroencephalography	\$22,971	\$24,368	\$1,397	6%
15	Occupational Therapy	\$197,817	\$232,728	\$34,911	18%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$917,780	\$875,391	(\$42,389)	-5%
19	Pulmonary Function	\$0	\$0	\$0	0%
20	Intravenous Therapy	\$195,514	\$211,999	\$16,485	8%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$0	\$0	\$0	0%
23	Renal Dialysis	\$0	\$0	\$0	0%
24	Emergency Room	\$4,140,507	\$4,734,167	\$593,660	14%
25	MRI	\$497,498	\$377,606	(\$119,892)	-24%
26	PET Scan	\$217,493	\$225,182	\$7,689	4%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$1,124,651	\$1,127,851	\$3,200	0%
29	Sleep Center	\$20,058	\$143,310	\$123,252	614%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$1,526,872	\$1,630,184	\$103,312	7%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$2,259,202	\$2,177,288	(\$81,914)	-4%
	Total Special Services	\$30,593,681	\$33,613,748	\$3,020,067	10%
D.	<u>Routine Services:</u>				
1	Medical & Surgical Units	\$7,647,962	\$7,568,545	(\$79,417)	-1%
2	Intensive Care Unit	\$2,775,574	\$2,886,011	\$110,437	4%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,264,898	\$2,300,302	\$35,404	2%
5	Pediatric Unit	\$127,658	\$87,805	(\$39,853)	-31%
6	Maternity Unit	\$2,625,041	\$2,759,236	\$134,195	5%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$833,397	\$782,877	(\$50,520)	-6%
11	Home Care	\$2,950,798	\$3,133,305	\$182,507	6%

BRISTOL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$127,394,892	\$ 125,941,019	\$130,360,493
2	Other Operating Revenue	4,807,086	6,100,777	5,173,982
3	Total Operating Revenue	\$132,201,978	\$132,041,796	\$135,534,475
4	Total Operating Expenses	130,987,633	131,894,527	134,486,303
5	Income/(Loss) From Operations	\$1,214,345	\$147,269	\$1,048,172
6	Total Non-Operating Revenue	571,472	2,043,267	1,253,154
7	Excess/(Deficiency) of Revenue Over Expenses	\$1,785,817	\$2,190,536	\$2,301,326
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	0.91%	0.11%	0.77%
2	Hospital Non Operating Margin	0.43%	1.52%	0.92%
3	Hospital Total Margin	1.35%	1.63%	1.68%
4	Income/(Loss) From Operations	\$1,214,345	\$147,269	\$1,048,172
5	Total Operating Revenue	\$132,201,978	\$132,041,796	\$135,534,475
6	Total Non-Operating Revenue	\$571,472	\$2,043,267	\$1,253,154
7	Total Revenue	\$132,773,450	\$134,085,063	\$136,787,629
8	Excess/(Deficiency) of Revenue Over Expenses	\$1,785,817	\$2,190,536	\$2,301,326
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$755,592	\$427,122	(\$376,115)
2	Hospital Total Net Assets	\$8,220,533	\$8,015,688	\$10,631,335
3	Hospital Change in Total Net Assets	\$981,273	(\$204,845)	\$2,615,647
4	Hospital Change in Total Net Assets %	113.6%	-2.5%	32.6%
D. <u>Cost Data Summary</u>				
1	<u>Ratio of Cost to Charges</u>	0.36	0.38	0.34
2	Total Operating Expenses	\$130,987,633	\$131,894,527	\$134,486,303
3	Total Gross Revenue	\$361,761,243	\$345,045,491	\$385,913,045
4	Total Other Operating Revenue	\$4,183,082	\$6,100,777	\$5,173,982
5	<u>Private Payment to Cost Ratio</u>	1.16	1.07	1.25
6	Total Non-Government Payments	\$55,032,662	\$50,073,303	\$58,148,995

BRISTOL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
7	Total Uninsured Payments	\$407,450	\$288,037	\$49,804
8	Total Non-Government Charges	\$137,745,436	\$129,411,845	\$142,039,704
9	Total Uninsured Charges	\$6,515,439	\$5,962,563	\$7,357,305
10	<u>Medicare Payment to Cost Ratio</u>	0.85	0.85	0.84
11	Total Medicare Payments	\$49,143,622	\$47,069,698	\$49,410,291
12	Total Medicare Charges	\$161,483,379	\$147,497,330	\$171,261,829
13	<u>Medicaid Payment to Cost Ratio</u>	0.71	0.72	0.66
14	Total Medicaid Payments	\$12,487,258	\$18,244,907	\$16,331,851
15	Total Medicaid Charges	\$48,959,762	\$67,117,976	\$71,804,797
16	<u>Uncompensated Care Cost</u>	\$4,010,210	\$3,782,697	\$3,525,525
17	Charity Care	\$259,103	\$223,751	\$3,781,958
18	Bad Debts	\$10,944,348	\$9,847,024	\$6,470,291
19	Total Uncompensated Care	\$11,203,451	\$10,070,775	\$10,252,249
20	<u>Uncompensated Care % of Total Expenses</u>	3.1%	2.9%	2.6%
21	Total Operating Expenses	\$130,987,633	\$131,894,527	\$134,486,303
E. <u>Liquidity Measures Summary</u>				
1	<u>Current Ratio</u>	1.37	1.19	1.46
2	Total Current Assets	\$29,386,098	\$32,740,835	\$39,003,484
3	Total Current Liabilities	\$21,393,198	\$27,546,189	\$26,770,362
4	<u>Days Cash on Hand</u>	24	13	27
5	Cash and Cash Equivalents	\$8,286,702	\$4,272,881	\$9,376,449
6	Short Term Investments	96,165	96,343	96,452
7	Total Cash and Short Term Investments	\$8,382,867	\$4,369,224	\$9,472,901
8	Total Operating Expenses	\$130,987,633	\$131,894,527	\$134,486,303
9	Depreciation Expense	\$5,241,260	\$5,714,642	\$6,320,576
10	Operating Expenses less Depreciation Expense	\$125,746,373	\$126,179,885	\$128,165,727
11	<u>Days Revenue in Patient Accounts Receivable</u>	43.42	66.10	51.87

BRISTOL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
12	Net Patient Accounts Receivable	\$ 15,483,112	\$ 20,427,829	\$ 16,562,143
13	Due From Third Party Payers	\$0	\$2,379,937	\$1,964,075
14	Due To Third Party Payers	\$327,508	\$0	\$0
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 15,155,604	\$ 22,807,766	\$ 18,526,218
16	Total Net Patient Revenue	\$127,394,892	\$ 125,941,019	\$ 130,360,493
17	Average Payment Period	62.10	79.68	76.24
18	Total Current Liabilities	\$21,393,198	\$27,546,189	\$26,770,362
19	Total Operating Expenses	\$130,987,633	\$131,894,527	\$134,486,303
20	Depreciation Expense	\$5,241,260	\$5,714,642	\$6,320,576
21	Total Operating Expenses less Depreciation Expense	\$125,746,373	\$126,179,885	\$128,165,727
F. Solvency Measures Summary				
1	Equity Financing Ratio	8.4	7.8	9.4
2	Total Net Assets	\$8,220,533	\$8,015,688	\$10,631,335
3	Total Assets	\$97,645,788	\$103,125,741	\$112,654,038
4	Cash Flow to Total Debt Ratio	14.4	14.6	16.3
5	Excess/(Deficiency) of Revenues Over Expenses	\$1,785,817	\$2,190,536	\$2,301,326
6	Depreciation Expense	\$5,241,260	\$5,714,642	\$6,320,576
7	Excess of Revenues Over Expenses and Depreciation Expense	\$7,027,077	\$7,905,178	\$8,621,902
8	Total Current Liabilities	\$21,393,198	\$27,546,189	\$26,770,362
9	Total Long Term Debt	\$27,352,868	\$26,550,048	\$26,020,086
10	Total Current Liabilities and Total Long Term Debt	\$48,746,066	\$54,096,237	\$52,790,448
11	Long Term Debt to Capitalization Ratio	76.9	76.8	71.0
12	Total Long Term Debt	\$27,352,868	\$26,550,048	\$26,020,086
13	Total Net Assets	\$8,220,533	\$8,015,688	\$10,631,335
14	Total Long Term Debt and Total Net Assets	\$35,573,401	\$34,565,736	\$36,651,421
15	Debt Service Coverage Ratio	4.7	3.7	4.2
16	Excess Revenues over Expenses	\$1,785,817	\$2,190,536	\$2,301,326
17	Interest Expense	\$1,693,322	\$1,833,355	\$1,641,972
18	Depreciation and Amortization Expense	\$5,241,260	\$5,714,642	\$6,320,576

BRISTOL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
19	Principal Payments	\$172,922	\$789,832	\$797,743
G. Other Financial Ratios				
20	Average Age of Plant	17.8	17.4	16.7
21	Accumulated Depreciation	\$93,518,978	\$99,185,736	\$105,453,829
22	Depreciation and Amortization Expense	\$5,241,260	\$5,714,642	\$6,320,576
H. Utilization Measures Summary				
1	Patient Days	30,673	28,670	29,383
2	Discharges	7,617	7,316	7,565
3	ALOS	4.0	3.9	3.9
4	Staffed Beds	132	132	132
5	Available Beds	-	154	154
6	Licensed Beds	154	154	154
6	Occupancy of Staffed Beds	63.7%	59.5%	61.0%
7	Occupancy of Available Beds	54.6%	51.0%	52.3%
8	Full Time Equivalent Employees	873.3	860.8	863.7
I. Hospital Gross Revenue Payer Mix Percentage				
1	Non-Government Gross Revenue Payer Mix Percentage	36.3%	35.8%	34.9%
2	Medicare Gross Revenue Payer Mix Percentage	44.6%	42.7%	44.4%
3	Medicaid Gross Revenue Payer Mix Percentage	13.5%	19.5%	18.6%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	3.4%	0.0%	0.0%
5	Uninsured Gross Revenue Payer Mix Percentage	1.8%	1.7%	1.9%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.3%	0.3%	0.2%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$131,229,997	\$123,449,282	\$134,682,399
9	Medicare Gross Revenue (Charges)	\$161,483,379	\$147,497,330	\$171,261,829
10	Medicaid Gross Revenue (Charges)	\$48,959,762	\$67,117,976	\$71,804,797
11	Other Medical Assistance Gross Revenue (Charges)	\$12,313,883	\$0	\$0
12	Uninsured Gross Revenue (Charges)	\$6,515,439	\$5,962,563	\$7,357,305
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$1,258,783	\$1,018,340	\$806,715
14	Total Gross Revenue (Charges)	\$361,761,243	\$345,045,491	\$385,913,045
J. Hospital Net Revenue Payer Mix Percentage				
1	Non-Government Net Revenue Payer Mix Percentage	45.9%	43.0%	46.8%

BRISTOL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
2	Medicare Net Revenue Payer Mix Percentage	41.3%	40.7%	39.8%
3	Medicaid Net Revenue Payer Mix Percentage	10.5%	15.8%	13.2%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	1.7%	0.0%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	0.3%	0.2%	0.0%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.2%	0.2%	0.2%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$54,625,212	\$49,785,266	\$58,099,191
9	Medicare Net Revenue (Payments)	\$49,143,622	\$47,069,698	\$49,410,291
10	Medicaid Net Revenue (Payments)	\$12,487,258	\$18,244,907	\$16,331,851
11	Other Medical Assistance Net Revenue (Payments)	\$2,033,680	\$0	\$0
12	Uninsured Net Revenue (Payments)	\$407,450	\$288,037	\$49,804
13	CHAMPUS / TRICARE Net Revenue Payments)	\$289,676	\$277,948	\$219,200
14	Total Net Revenue (Payments)	\$118,986,898	\$115,665,856	\$124,110,337
K.	Discharges			
1	Non-Government (Including Self Pay / Uninsured)	2,486	2,320	2,350
2	Medicare	3,426	3,378	3,565
3	Medical Assistance	1,685	1,593	1,625
4	Medicaid	1,325	1,593	1,625
5	Other Medical Assistance	360	-	-
6	CHAMPUS / TRICARE	20	25	25
7	Uninsured (Included In Non-Government)	64	38	119
8	Total	7,617	7,316	7,565
L.	Case Mix Index			
1	Non-Government (Including Self Pay / Uninsured)	0.946400	0.974500	0.965200
2	Medicare	1.287300	1.292400	1.299600
3	Medical Assistance	0.854425	0.930700	0.942500
4	Medicaid	0.839000	0.930700	0.942500
5	Other Medical Assistance	0.911200	0.000000	0.000000
6	CHAMPUS / TRICARE	1.509400	1.161300	0.735700
7	Uninsured (Included In Non-Government)	0.892300	0.829600	0.940000
8	Total Case Mix Index	1.080863	1.112384	1.117151
M.	Emergency Department Visits			
1	Emergency Room - Treated and Admitted	5,467	5,363	5,787
2	Emergency Room - Treated and Discharged	33,293	34,497	32,242
3	Total Emergency Room Visits	38,760	39,860	38,029

BRISTOL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. MEDICARE MANAGED CARE					
A. ANTHEM - MEDICARE BLUE CONNECTICUT					
1	Inpatient Charges	\$437,906	\$582,821	\$144,915	33%
2	Inpatient Payments	\$121,188	\$257,889	\$136,701	113%
3	Outpatient Charges	\$633,084	\$995,843	\$362,759	57%
4	Outpatient Payments	\$234,691	\$290,002	\$55,311	24%
5	Discharges	19	31	12	63%
6	Patient Days	89	75	(14)	-16%
7	Outpatient Visits (Excludes ED Visits)	243	598	355	146%
8	Emergency Department Outpatient Visits	32	65	33	103%
9	Emergency Department Inpatient Admissions	17	16	(1)	-6%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,070,990	\$1,578,664	\$507,674	47%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$355,879	\$547,891	\$192,012	54%
B. CIGNA HEALTHCARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C. CONNECTICARE, INC.					
1	Inpatient Charges	\$2,009,391	\$4,522,539	\$2,513,148	125%
2	Inpatient Payments	\$657,321	\$1,448,611	\$791,290	120%
3	Outpatient Charges	\$3,609,521	\$7,202,175	\$3,592,654	100%
4	Outpatient Payments	\$857,944	\$1,411,615	\$553,671	65%
5	Discharges	93	197	104	112%
6	Patient Days	393	561	168	43%
7	Outpatient Visits (Excludes ED Visits)	1,868	3,917	2,049	110%
8	Emergency Department Outpatient Visits	230	284	54	23%
9	Emergency Department Inpatient Admissions	77	124	47	61%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$5,618,912	\$11,724,714	\$6,105,802	109%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,515,265	\$2,860,226	\$1,344,961	89%

BRISTOL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$2,494,497	\$0	(\$2,494,497)	-100%
2	Inpatient Payments	\$836,477	\$0	(\$836,477)	-100%
3	Outpatient Charges	\$2,186,852	\$0	(\$2,186,852)	-100%
4	Outpatient Payments	\$535,155	\$0	(\$535,155)	-100%
5	Discharges	96	0	(96)	-100%
6	Patient Days	466	0	(466)	-100%
7	Outpatient Visits (Excludes ED Visits)	970	0	(970)	-100%
8	Emergency Department Outpatient Visits	150	0	(150)	-100%
9	Emergency Department Inpatient Admissions	81	0	(81)	-100%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$4,681,349	\$0	(\$4,681,349)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,371,632	\$0	(\$1,371,632)	-100%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$116,175	\$63,954	(\$52,221)	-45%
2	Inpatient Payments	\$38,531	\$24,682	(\$13,849)	-36%
3	Outpatient Charges	\$115,081	\$60,932	(\$54,149)	-47%
4	Outpatient Payments	\$23,188	\$10,505	(\$12,683)	-55%
5	Discharges	5	1	(4)	-80%
6	Patient Days	13	19	6	46%
7	Outpatient Visits (Excludes ED Visits)	64	14	(50)	-78%
8	Emergency Department Outpatient Visits	33	14	(19)	-58%
9	Emergency Department Inpatient Admissions	4	4	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$231,256	\$124,886	(\$106,370)	-46%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$61,719	\$35,187	(\$26,532)	-43%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

BRISTOL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
G. UNITED HEALTHCARE INSURANCE COMPANY					
1	Inpatient Charges	\$5,721,008	\$9,220,720	\$3,499,712	61%
2	Inpatient Payments	\$1,942,277	\$3,490,116	\$1,547,839	80%
3	Outpatient Charges	\$7,351,324	\$11,329,596	\$3,978,272	54%
4	Outpatient Payments	\$1,773,979	\$2,376,262	\$602,283	34%
5	Discharges	287	367	80	28%
6	Patient Days	1,181	1,950	769	65%
7	Outpatient Visits (Excludes ED Visits)	3,829	7,013	3,184	83%
8	Emergency Department Outpatient Visits	534	668	134	25%
9	Emergency Department Inpatient Admissions	247	379	132	53%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$13,072,332	\$20,550,316	\$7,477,984	57%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$3,716,256	\$5,866,378	\$2,150,122	58%
H. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$561,655	\$767,385	\$205,730	37%
2	Inpatient Payments	\$160,518	\$283,876	\$123,358	77%
3	Outpatient Charges	\$516,643	\$838,936	\$322,293	62%
4	Outpatient Payments	\$92,044	\$135,326	\$43,282	47%
5	Discharges	27	26	(1)	-4%
6	Patient Days	137	243	106	77%
7	Outpatient Visits (Excludes ED Visits)	198	425	227	115%
8	Emergency Department Outpatient Visits	84	91	7	8%
9	Emergency Department Inpatient Admissions	25	45	20	80%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,078,298	\$1,606,321	\$528,023	49%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$252,562	\$419,202	\$166,640	66%
I. AETNA					
1	Inpatient Charges	\$843,555	\$1,122,170	\$278,615	33%
2	Inpatient Payments	\$330,760	\$437,779	\$107,019	32%
3	Outpatient Charges	\$910,453	\$1,490,990	\$580,537	64%
4	Outpatient Payments	\$283,602	\$336,398	\$52,796	19%
5	Discharges	41	48	7	17%
6	Patient Days	155	206	51	33%
7	Outpatient Visits (Excludes ED Visits)	583	902	319	55%
8	Emergency Department Outpatient Visits	61	111	50	82%
9	Emergency Department Inpatient Admissions	34	38	4	12%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,754,008	\$2,613,160	\$859,152	49%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$614,362	\$774,177	\$159,815	26%

BRISTOL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
J. HUMANA					
1	Inpatient Charges	\$12,074	\$26,214	\$14,140	117%
2	Inpatient Payments	\$5,164	\$15,444	\$10,280	199%
3	Outpatient Charges	\$19,568	\$15,375	(\$4,193)	-21%
4	Outpatient Payments	\$4,072	\$4,048	(\$24)	-1%
5	Discharges	1	1	0	0%
6	Patient Days	4	11	7	175%
7	Outpatient Visits (Excludes ED Visits)	8	25	17	213%
8	Emergency Department Outpatient Visits	8	1	(7)	-88%
9	Emergency Department Inpatient Admissions	1	3	2	200%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$31,642	\$41,589	\$9,947	31%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$9,236	\$19,492	\$10,256	111%
K. SECURE HORIZONS					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
L. UNICARE LIFE & HEALTH INSURANCE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

BRISTOL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
M.	UNIVERSAL AMERICAN				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N.	EVERCARE				
1	Inpatient Charges	\$525,965	\$219,637	(\$306,328)	-58%
2	Inpatient Payments	\$174,393	\$88,392	(\$86,001)	-49%
3	Outpatient Charges	\$402,980	\$296,994	(\$105,986)	-26%
4	Outpatient Payments	\$100,209	\$70,880	(\$29,329)	-29%
5	Discharges	22	19	(3)	-14%
6	Patient Days	121	51	(70)	-58%
7	Outpatient Visits (Excludes ED Visits)	260	379	119	46%
8	Emergency Department Outpatient Visits	65	36	(29)	-45%
9	Emergency Department Inpatient Admissions	19	14	(5)	-26%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$928,945	\$516,631	(\$412,314)	-44%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$274,602	\$159,272	(\$115,330)	-42%
II.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$12,722,226	\$16,525,440	\$3,803,214	30%
	TOTAL INPATIENT PAYMENTS	\$4,266,629	\$6,046,789	\$1,780,160	42%
	TOTAL OUTPATIENT CHARGES	\$15,745,506	\$22,230,841	\$6,485,335	41%
	TOTAL OUTPATIENT PAYMENTS	\$3,904,884	\$4,635,036	\$730,152	19%
	TOTAL DISCHARGES	591	690	99	17%
	TOTAL PATIENT DAYS	2,559	3,116	557	22%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	8,023	13,273	5,250	65%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	1,197	1,270	73	6%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	505	623	118	23%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$28,467,732	\$38,756,281	\$10,288,549	36%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$8,171,513	\$10,681,825	\$2,510,312	31%

BRISTOL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$5,957,223	\$1,185,502	(\$4,771,721)	-80%
2	Inpatient Payments	\$1,504,568	\$158,380	(\$1,346,188)	-89%
3	Outpatient Charges	\$18,418,803	\$4,114,983	(\$14,303,820)	-78%
4	Outpatient Payments	\$4,569,375	\$524,385	(\$4,044,990)	-89%
5	Discharges	534	81	(453)	-85%
6	Patient Days	1,420	281	(1,139)	-80%
7	Outpatient Visits (Excludes ED Visits)	7,408	1,982	(5,426)	-73%
8	Emergency Department Outpatient Visits	6,027	1,377	(4,650)	-77%
9	Emergency Department Inpatient Admissions	135	25	(110)	-81%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$24,376,026	\$5,300,485	(\$19,075,541)	-78%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$6,073,943	\$682,765	(\$5,391,178)	-89%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

BRISTOL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
D.	OTHER MEDICAID MANAGED CARE				
1	Inpatient Charges	\$981,374	\$216,381	(\$764,993)	-78%
2	Inpatient Payments	\$278,206	\$29,132	(\$249,074)	-90%
3	Outpatient Charges	\$829,883	\$208,233	(\$621,650)	-75%
4	Outpatient Payments	\$248,092	\$37,055	(\$211,037)	-85%
5	Discharges	105	21	(84)	-80%
6	Patient Days	404	73	(331)	-82%
7	Outpatient Visits (Excludes ED Visits)	1,407	324	(1,083)	-77%
8	Emergency Department Outpatient Visits	13	3	(10)	-77%
9	Emergency Department Inpatient Admissions	91	19	(72)	-79%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,811,257	\$424,614	(\$1,386,643)	-77%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$526,298	\$66,187	(\$460,111)	-87%
E.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F.	FIRST CHOICE OF CONNECTICUT, PREFERRED ONE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

BRISTOL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3) FY 2011 ACTUAL	(4) FY 2012 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$848,011	\$110,599	(\$737,412)	-87%
2	Inpatient Payments	\$209,169	\$17,789	(\$191,380)	-91%
3	Outpatient Charges	\$1,340,181	\$344,400	(\$995,781)	-74%
4	Outpatient Payments	\$299,597	\$40,112	(\$259,485)	-87%
5	Discharges	67	13	(54)	-81%
6	Patient Days	195	31	(164)	-84%
7	Outpatient Visits (Excludes ED Visits)	655	180	(475)	-73%
8	Emergency Department Outpatient Visits	546	135	(411)	-75%
9	Emergency Department Inpatient Admissions	19	5	(14)	-74%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$2,188,192	\$454,999	(\$1,733,193)	-79%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$508,766	\$57,901	(\$450,865)	-89%
H.	AETNA				
1	Inpatient Charges	\$398,159	\$132,908	(\$265,251)	-67%
2	Inpatient Payments	\$69,791	\$18,471	(\$51,320)	-74%
3	Outpatient Charges	\$1,582,812	\$308,729	(\$1,274,083)	-80%
4	Outpatient Payments	\$354,907	\$33,786	(\$321,121)	-90%
5	Discharges	29	11	(18)	-62%
6	Patient Days	73	35	(38)	-52%
7	Outpatient Visits (Excludes ED Visits)	176	58	(118)	-67%
8	Emergency Department Outpatient Visits	999	181	(818)	-82%
9	Emergency Department Inpatient Admissions	22	8	(14)	-64%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,980,971	\$441,637	(\$1,539,334)	-78%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$424,698	\$52,257	(\$372,441)	-88%
II.	TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$8,184,767	\$1,645,390	(\$6,539,377)	-80%
	TOTAL INPATIENT PAYMENTS	\$2,061,734	\$223,772	(\$1,837,962)	-89%
	TOTAL OUTPATIENT CHARGES	\$22,171,679	\$4,976,345	(\$17,195,334)	-78%
	TOTAL OUTPATIENT PAYMENTS	\$5,471,971	\$635,338	(\$4,836,633)	-88%
	TOTAL DISCHARGES	735	126	(609)	-83%
	TOTAL PATIENT DAYS	2,092	420	(1,672)	-80%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	9,646	2,544	(7,102)	-74%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	7,585	1,696	(5,889)	-78%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	267	57	(210)	-79%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$30,356,446	\$6,621,735	(\$23,734,711)	-78%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$7,533,705	\$859,110	(\$6,674,595)	-89%

**BRISTOL HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2012
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE

BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$9,063,284	\$12,928,177	\$3,864,893	43%
2	Short Term Investments	\$96,343	\$96,452	\$109	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$24,121,394	\$20,476,194	(\$3,645,200)	-15%
4	Current Assets Whose Use is Limited for Current Liabilities	\$654,455	\$650,968	(\$3,487)	-1%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$2,379,937	\$1,964,075	(\$415,862)	-17%
7	Inventories of Supplies	\$1,731,093	\$1,627,771	(\$103,322)	-6%
8	Prepaid Expenses	\$518,896	\$860,601	\$341,705	66%
9	Other Current Assets	\$1,618,950	\$5,925,593	\$4,306,643	266%
	Total Current Assets	\$40,184,352	\$44,529,831	\$4,345,479	11%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$6,253,488	\$7,458,112	\$1,204,624	19%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$15,480,513	\$16,194,282	\$713,769	5%
	Total Noncurrent Assets Whose Use is Limited:	\$21,734,001	\$23,652,394	\$1,918,393	9%
5	Interest in Net Assets of Foundation	\$1,493,598	\$2,506,470	\$1,012,872	68%
6	Long Term Investments	\$6,015,999	\$7,231,860	\$1,215,861	20%
7	Other Noncurrent Assets	\$2,552,059	\$2,537,453	(\$14,606)	-1%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$153,806,770	\$156,431,776	\$2,625,006	2%
2	Less: Accumulated Depreciation	\$109,172,229	\$116,102,360	\$6,930,131	\$0
	Property, Plant and Equipment, Net	\$44,634,541	\$40,329,416	(\$4,305,125)	-10%
3	Construction in Progress	\$149,341	\$1,841,857	\$1,692,516	1133%
	Total Net Fixed Assets	\$44,783,882	\$42,171,273	(\$2,612,609)	-6%
	Total Assets	\$116,763,891	\$122,629,281	\$5,865,390	5%

BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
II. <u>LIABILITIES AND NET ASSETS</u>					
A. <u>Current Liabilities:</u>					
1	Accounts Payable and Accrued Expenses	\$13,113,207	\$10,947,996	(\$2,165,211)	-17%
2	Salaries, Wages and Payroll Taxes	\$12,731,046	\$14,340,489	\$1,609,443	13%
3	Due To Third Party Payers	\$0	\$0	\$0	0%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$1,230,305	\$990,292	(\$240,013)	-20%
6	Current Portion of Notes Payable	\$7,444	\$7,826	\$382	5%
7	Other Current Liabilities	\$3,952,806	\$3,774,737	(\$178,069)	-5%
	Total Current Liabilities	\$31,034,808	\$30,061,340	(\$973,468)	-3%
B. <u>Long Term Debt:</u>					
1	Bonds Payable (Net of Current Portion)	\$31,065,526	\$30,052,808	(\$1,012,718)	-3%
2	Notes Payable (Net of Current Portion)	\$297,963	\$290,135	(\$7,828)	-3%
	Total Long Term Debt	\$31,363,489	\$30,342,943	(\$1,020,546)	-3%
3	Accrued Pension Liability	\$25,622,329	\$30,446,134	\$4,823,805	19%
4	Other Long Term Liabilities	\$17,247,851	\$20,373,037	\$3,125,186	18%
	Total Long Term Liabilities	\$74,233,669	\$81,162,114	\$6,928,445	9%
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
C. <u>Net Assets:</u>					
1	Unrestricted Net Assets or Equity	\$2,677,931	\$1,127,653	(\$1,550,278)	-58%
2	Temporarily Restricted Net Assets	\$2,250,412	\$3,350,571	\$1,100,159	49%
3	Permanently Restricted Net Assets	\$6,567,071	\$6,927,603	\$360,532	5%
	Total Net Assets	\$11,495,414	\$11,405,827	(\$89,587)	-1%
	Total Liabilities and Net Assets	\$116,763,891	\$122,629,281	\$5,865,390	5%

BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2011 ACTUAL	FY 2012 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$390,926,400	\$435,147,772	\$44,221,372	11%
2	Less: Allowances	\$235,543,944	\$271,142,564	\$35,598,620	15%
3	Less: Charity Care	\$223,751	\$3,781,958	\$3,558,207	1590%
4	Less: Other Deductions	\$0	\$0	\$0	0%
	Total Net Patient Revenue	\$155,158,705	\$160,223,250	\$5,064,545	3%
5	Other Operating Revenue	\$8,394,129	\$7,071,296	(\$1,322,833)	-16%
6	Net Assets Released from Restrictions	\$0	\$0	\$0	0%
	Total Operating Revenue	\$163,552,834	\$167,294,546	\$3,741,712	2%
B. Operating Expenses:					
1	Salaries and Wages	\$72,229,733	\$76,026,760	\$3,797,027	5%
2	Fringe Benefits	\$20,027,192	\$17,641,018	(\$2,386,174)	-12%
3	Physicians Fees	\$2,274,756	\$1,294,829	(\$979,927)	-43%
4	Supplies and Drugs	\$19,027,463	\$20,892,182	\$1,864,719	10%
5	Depreciation and Amortization	\$6,287,283	\$7,011,232	\$723,949	12%
6	Bad Debts	\$11,141,062	\$7,606,229	(\$3,534,833)	-32%
7	Interest	\$2,148,712	\$1,943,647	(\$205,065)	-10%
8	Malpractice	\$1,863,983	\$1,844,897	(\$19,086)	-1%
9	Other Operating Expenses	\$29,004,715	\$33,132,110	\$4,127,395	14%
	Total Operating Expenses	\$164,004,899	\$167,392,904	\$3,388,005	2%
	Income/(Loss) From Operations	(\$452,065)	(\$98,358)	\$353,707	-78%
C. Non-Operating Revenue:					
1	Income from Investments	\$528,681	\$368,338	(\$160,343)	-30%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$1,641,535	\$930,385	(\$711,150)	-43%
	Total Non-Operating Revenue	\$2,170,216	\$1,298,723	(\$871,493)	-40%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$1,718,151	\$1,200,365	(\$517,786)	-30%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$0	\$0	\$0	0%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$0	\$0	\$0	0%
	Excess/(Deficiency) of Revenue Over Expenses	\$1,718,151	\$1,200,365	(\$517,786)	-30%

BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2012

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
A. Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$154,305,654	\$155,158,705	\$160,223,250
2	Other Operating Revenue	7,156,743	8,394,129	7,071,296
3	Total Operating Revenue	\$161,462,397	\$163,552,834	\$167,294,546
4	Total Operating Expenses	160,538,371	164,004,899	167,392,904
5	Income/(Loss) From Operations	\$924,026	(\$452,065)	(\$98,358)
6	Total Non-Operating Revenue	646,372	2,170,216	1,298,723
7	Excess/(Deficiency) of Revenue Over Expenses	\$1,570,398	\$1,718,151	\$1,200,365
B. Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	0.57%	-0.27%	-0.06%
2	Parent Corporation Non-Operating Margin	0.40%	1.31%	0.77%
3	Parent Corporation Total Margin	0.97%	1.04%	0.71%
4	Income/(Loss) From Operations	\$924,026	(\$452,065)	(\$98,358)
5	Total Operating Revenue	\$161,462,397	\$163,552,834	\$167,294,546
6	Total Non-Operating Revenue	\$646,372	\$2,170,216	\$1,298,723
7	Total Revenue	\$162,108,769	\$165,723,050	\$168,593,269
8	Excess/(Deficiency) of Revenue Over Expenses	\$1,570,398	\$1,718,151	\$1,200,365
C. Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	\$2,731,601	\$2,677,931	\$1,127,653
2	Parent Corporation Total Net Assets	\$11,328,776	\$11,495,414	\$11,405,827
3	Parent Corporation Change in Total Net Assets	\$2,617,961	\$166,638	(\$89,587)
4	Parent Corporation Change in Total Net Assets %	130.1%	1.5%	-0.8%

BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2012

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
D.	<u>Liquidity Measures Summary</u>			
1	<u>Current Ratio</u>	1.48	1.29	1.48
2	Total Current Assets	\$36,043,465	\$40,184,352	\$44,529,831
3	Total Current Liabilities	\$24,376,569	\$31,034,808	\$30,061,340
4	<u>Days Cash on Hand</u>	29	21	30
5	Cash and Cash Equivalents	\$11,995,841	\$9,063,284	\$12,928,177
6	Short Term Investments	96,165	96,343	96,452
7	Total Cash and Short Term Investments	\$12,092,006	\$9,159,627	\$13,024,629
8	Total Operating Expenses	\$160,538,371	\$164,004,899	\$167,392,904
9	Depreciation Expense	\$5,850,296	\$6,287,283	\$7,011,232
10	Operating Expenses less Depreciation Expense	\$154,688,075	\$157,717,616	\$160,381,672
11	<u>Days Revenue in Patient Accounts Receivable</u>	44	62	51
12	Net Patient Accounts Receivable	\$ 18,907,341	\$ 24,121,394	\$ 20,476,194
13	Due From Third Party Payers	\$0	\$2,379,937	\$1,964,075
14	Due To Third Party Payers	\$327,508	\$0	\$0
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 18,579,833	\$ 26,501,331	\$ 22,440,269
16	Total Net Patient Revenue	\$154,305,654	\$155,158,705	\$160,223,250
17	<u>Average Payment Period</u>	58	72	68
18	Total Current Liabilities	\$24,376,569	\$31,034,808	\$30,061,340
19	Total Operating Expenses	\$160,538,371	\$164,004,899	\$167,392,904
20	Depreciation Expense	\$5,850,296	\$6,287,283	\$7,011,232
21	Total Operating Expenses less Depreciation Expense	\$154,688,075	\$157,717,616	\$160,381,672

BRISTOL HOSPITAL & HEALTH CARE GROUP, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2010	FY 2011	FY 2012
E.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	10.3	9.8	9.3
2	Total Net Assets	\$11,328,776	\$11,495,414	\$11,405,827
3	Total Assets	\$110,495,964	\$116,763,891	\$122,629,281
4	<u>Cash Flow to Total Debt Ratio</u>	13.0	12.8	13.6
5	Excess/(Deficiency) of Revenues Over Expenses	\$1,570,398	\$1,718,151	\$1,200,365
6	Depreciation Expense	\$5,850,296	\$6,287,283	\$7,011,232
7	Excess of Revenues Over Expenses and Depreciation Expense	\$7,420,694	\$8,005,434	\$8,211,597
8	Total Current Liabilities	\$24,376,569	\$31,034,808	\$30,061,340
9	Total Long Term Debt	\$32,639,388	\$31,363,489	\$30,342,943
10	Total Current Liabilities and Total Long Term Debt	\$57,015,957	\$62,398,297	\$60,404,283
11	<u>Long Term Debt to Capitalization Ratio</u>	74.2	73.2	72.7
12	Total Long Term Debt	\$32,639,388	\$31,363,489	\$30,342,943
13	Total Net Assets	\$11,328,776	\$11,495,414	\$11,405,827
14	Total Long Term Debt and Total Net Assets	\$43,968,164	\$42,858,903	\$41,748,770

BRISTOL HOSPITAL								
TWELVE MONTHS ACTUAL FILING								
FISCAL YEAR 2012								
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT								
(1)	(2)	(3)	3(a)	3(b)	(4)	(5)	(6)	(7)
			DISCHARGES				OCCUPANCY	OCCUPANCY
		PATIENT	OR ICU/CCU	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	DAYS	# PATIENT		BEDS (A)	BEDS	BEDS (A)	BEDS
1	Adult Medical/Surgical	19,079	5,237	5,246	78	86	67.0%	60.8%
2	ICU/CCU (Excludes Neonatal ICU)	2,471	240	0	14	14	48.4%	48.4%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	4,604	1,028	1,026	14	16	90.1%	78.8%
	TOTAL PSYCHIATRIC	4,604	1,028	1,026	14	16	90.1%	78.8%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	1,616	645	645	15	15	29.5%	29.5%
7	Newborn	1,519	612	604	8	20	52.0%	20.8%
8	Neonatal ICU	0	0	0	0	0	0.0%	0.0%
9	Pediatric	94	43	42	3	3	8.6%	8.6%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	27,864	6,953	6,959	124	134	61.6%	57.0%
	TOTAL INPATIENT BED UTILIZATION	29,383	7,565	7,563	132	154	61.0%	52.3%
	TOTAL INPATIENT REPORTED YEAR	29,383	7,565	7,563	132	154	61.0%	52.3%
	TOTAL INPATIENT PRIOR YEAR	28,670	7,316	6,617	132	154	59.5%	51.0%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	713	249	946	0	0	1.5%	1.3%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	2%	3%	14%	0%	0%	2%	2%
	Total Licensed Beds and Bassinets	154						
(A) This number may not exceed the number of available beds for each department or in total.								
Note: Total discharges do not include ICU/CCU patients.								

BRISTOL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	3,173	3,489	316	10%
2	Outpatient Scans (Excluding Emergency Department Scans)	3,297	2,792	-505	-15%
3	Emergency Department Scans	9,630	4,028	-5,602	-58%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	16,100	10,309	-5,791	-36%
B. MRI Scans (A)					
1	Inpatient Scans	343	314	-29	-8%
2	Outpatient Scans (Excluding Emergency Department Scans)	2,660	2,675	15	1%
3	Emergency Department Scans	229	143	-86	-38%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	3,232	3,132	-100	-3%
C. PET Scans (A)					
1	Inpatient Scans	0	1	1	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	181	191	10	6%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	181	192	11	6%
D. PET/CT Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	0	0	0	0%
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
E. Linear Accelerator Procedures					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Linear Accelerator Procedures	0	0	0	0%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	0	0	0	0%
2	Outpatient Procedures	0	0	0	0%
	Total Cardiac Catheterization Procedures	0	0	0	0%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	0	0	0	0%
2	Elective Procedures	0	0	0	0%
	Total Cardiac Angioplasty Procedures	0	0	0	0%
H. Electrophysiology Studies					
1	Inpatient Studies	0	0	0	0%
2	Outpatient Studies	0	0	0	0%
	Total Electrophysiology Studies	0	0	0	0%
I. Surgical Procedures					
1	Inpatient Surgical Procedures	1,334	1,219	-115	-9%
2	Outpatient Surgical Procedures	3,319	3,412	93	3%
	Total Surgical Procedures	4,653	4,631	-22	0%
J. Endoscopy Procedures					

BRISTOL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
1	Inpatient Endoscopy Procedures	498	490	-8	-2%
2	Outpatient Endoscopy Procedures	1,950	1,701	-249	-13%
	Total Endoscopy Procedures	2,448	2,191	-257	-10%
K.	<u>Hospital Emergency Room Visits</u>				
1	Emergency Room Visits: Treated and Admitted	5,363	5,787	424	8%
2	Emergency Room Visits: Treated and Discharged	34,497	32,242	-2,255	-7%
	Total Emergency Room Visits	39,860	38,029	-1,831	-5%
L.	<u>Hospital Clinic Visits</u>				
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	22,116	26,892	4,776	22%
4	Medical Clinic Visits	0	0	0	0%
5	Specialty Clinic Visits	0	0	0	0%
	Total Hospital Clinic Visits	22,116	26,892	4,776	22%
M.	<u>Other Hospital Outpatient Visits</u>				
1	Rehabilitation (PT/OT/ST)	85,137	91,757	6,620	8%
2	Cardiology	3,337	3,487	150	4%
3	Chemotherapy	8,697	8,982	285	3%
4	Gastroenterology	1,100	1,131	31	3%
5	Other Outpatient Visits	3,416	3,039	-377	-11%
	Total Other Hospital Outpatient Visits	101,687	108,396	6,709	7%
N.	<u>Hospital Full Time Equivalent Employees</u>				
1	Total Nursing FTEs	278.2	281.4	3.2	1%
2	Total Physician FTEs	1.9	1.4	-0.5	-26%
3	Total Non-Nursing and Non-Physician FTEs	580.7	580.9	0.2	0%
	Total Hospital Full Time Equivalent Employees	860.8	863.7	2.9	0%

BRISTOL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
A.	<u>Outpatient Surgical Procedures</u>				
1	Bristol Hospital Campus	3,319	3,412	93	3%
	Total Outpatient Surgical Procedures(A)	3,319	3,412	93	3%
B.	<u>Outpatient Endoscopy Procedures</u>				
1	Bristol Hospital Campus	1,950	1,701	-249	-13%
	Total Outpatient Endoscopy Procedures(B)	1,950	1,701	-249	-13%
C.	<u>Outpatient Hospital Emergency Room Visits</u>				
1	Bristol Hospital Campus	34,497	32,242	-2,255	-7%
	Total Outpatient Hospital Emergency Room Visits(C)	34,497	32,242	-2,255	-7%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
I.	DATA BY MAJOR PAYER CATEGORY				
A.	MEDICARE				
	MEDICARE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$73,322,938	\$79,117,811	\$5,794,873	8%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$29,190,396	\$31,448,123	\$2,257,727	8%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	39.81%	39.75%	-0.06%	0%
4	DISCHARGES	3,378	3,565	187	6%
5	CASE MIX INDEX (CMI)	1.29240	1.29960	0.00720	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	4,365.72720	4,633.07400	267.34680	6%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,686.26	\$6,787.74	\$101.48	2%
8	PATIENT DAYS	15,650	15,919	269	2%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,865.20	\$1,975.51	\$110.31	6%
10	AVERAGE LENGTH OF STAY	4.6	4.5	(0.2)	-4%
	MEDICARE OUTPATIENT				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$74,174,392	\$92,144,018	\$17,969,626	24%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$17,879,302	\$17,962,168	\$82,866	0%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.10%	19.49%	-4.61%	-19%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	101.16%	116.46%	15.30%	15%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,417.22663	4,151.95289	734.72626	22%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,232.11	\$4,326.20	(\$905.91)	-17%
	MEDICARE TOTALS (INPATIENT + OUTPATIENT)				
17	TOTAL ACCRUED CHARGES	\$147,497,330	\$171,261,829	\$23,764,499	16%
18	TOTAL ACCRUED PAYMENTS	\$47,069,698	\$49,410,291	\$2,340,593	5%
19	TOTAL ALLOWANCES	\$100,427,632	\$121,851,538	\$21,423,906	21%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
B.	<u>NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)</u>				
	<u>NON-GOVERNMENT INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$36,465,574	\$39,512,803	\$3,047,229	8%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$17,006,157	\$23,201,211	\$6,195,054	36%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	46.64%	58.72%	12.08%	26%
4	DISCHARGES	2,320	2,350	30	1%
5	CASE MIX INDEX (CMI)	0.97450	0.96520	(0.00930)	-1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,260.84000	2,268.22000	7.38000	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$7,522.05	\$10,228.82	\$2,706.77	36%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$835.79)	(\$3,441.07)	(\$2,605.28)	312%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$1,889,588)	(\$7,805,113)	(\$5,915,525)	313%
10	PATIENT DAYS	7,286	7,290	4	0%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,334.09	\$3,182.61	\$848.52	36%
12	AVERAGE LENGTH OF STAY	3.1	3.1	(0.0)	-1%
	<u>NON-GOVERNMENT OUTPATIENT</u>				
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$92,946,271	\$102,526,901	\$9,580,630	10%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$33,067,146	\$34,947,784	\$1,880,638	6%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	35.58%	34.09%	-1.49%	-4%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	254.89%	259.48%	4.59%	2%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	5,913.39516	6,097.72527	184.33011	3%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,591.91	\$5,731.28	\$139.38	2%
19	MEDICARE - NON-GOVERNMENT OP PMT / OPED	(\$359.80)	(\$1,405.08)	(\$1,045.29)	291%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$2,127,618)	(\$8,567,821)	(\$6,440,202)	303%
	<u>NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)</u>				
21	TOTAL ACCRUED CHARGES	\$129,411,845	\$142,039,704	\$12,627,859	10%
22	TOTAL ACCRUED PAYMENTS	\$50,073,303	\$58,148,995	\$8,075,692	16%
23	TOTAL ALLOWANCES	\$79,338,542	\$83,890,709	\$4,552,167	6%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$4,017,207)	(\$16,372,933)	(\$12,355,727)	308%
	<u>NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA</u>				
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$122,450,596	\$128,985,172	\$6,534,576	5%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$58,072,723	\$61,783,743	\$3,711,020	6%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$64,377,873	\$67,201,429	\$2,823,556	4%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	52.57%	52.10%	-0.47%	

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
C.	UNINSURED				
	UNINSURED INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$814,154	\$1,720,349	\$906,195	111%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$20,077	\$13,248	(\$6,829)	-34%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	2.47%	0.77%	-1.70%	-69%
4	DISCHARGES	38	119	81	213%
5	CASE MIX INDEX (CMI)	0.82960	0.94000	0.11040	13%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	31.52480	111.86000	80.33520	255%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$636.86	\$118.43	(\$518.43)	-81%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$6,885.19	\$10,110.38	\$3,225.20	47%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$6,049.40	\$6,669.31	\$619.91	10%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$190,706	\$746,029	\$555,323	291%
11	PATIENT DAYS	157	370	213	136%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$127.88	\$35.81	(\$92.07)	-72%
13	AVERAGE LENGTH OF STAY	4.1	3.1	(1.0)	-25%
	UNINSURED OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$5,148,409	\$5,636,956	\$488,547	9%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$267,960	\$36,556	(\$231,404)	-86%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	5.20%	0.65%	-4.56%	-88%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	632.36%	327.66%	-304.70%	-48%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	240.29796	389.91958	149.62163	62%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$1,115.12	\$93.75	(\$1,021.36)	-92%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$4,476.79	\$5,637.53	\$1,160.74	26%
21	MEDICARE - UNINSURED OP PMT / OPED	\$4,116.99	\$4,232.44	\$115.45	3%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$989,305	\$1,650,313	\$661,008	67%
	UNINSURED TOTALS (INPATIENT AND OUTPATIENT)				
23	TOTAL ACCRUED CHARGES	\$5,962,563	\$7,357,305	\$1,394,742	23%
24	TOTAL ACCRUED PAYMENTS	\$288,037	\$49,804	(\$238,233)	-83%
25	TOTAL ALLOWANCES	\$5,674,526	\$7,307,501	\$1,632,975	29%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$1,180,011	\$2,396,342	\$1,216,331	103%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
D.	<u>STATE OF CONNECTICUT MEDICAID</u>				
	<u>MEDICAID INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$21,507,928	\$23,778,114	\$2,270,186	11%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$6,632,224	\$6,283,677	(\$348,547)	-5%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	30.84%	26.43%	-4.41%	-14%
4	DISCHARGES	1,593	1,625	32	2%
5	CASE MIX INDEX (CMI)	0.93070	0.94250	0.01180	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,482,60510	1,531,56250	48,95740	3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,473.36	\$4,102.79	(\$370.57)	-8%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$3,048.69	\$6,126.03	\$3,077.34	101%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$2,212.90	\$2,684.96	\$472.05	21%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,280,862	\$4,112,178	\$831,316	25%
11	PATIENT DAYS	5,653	6,109	456	8%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,173.22	\$1,028.59	(\$144.63)	-12%
13	AVERAGE LENGTH OF STAY	3.5	3.8	0.2	6%
	<u>MEDICAID OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$45,610,048	\$48,026,683	\$2,416,635	5%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$11,612,683	\$10,048,174	(\$1,564,509)	-13%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.46%	20.92%	-4.54%	-18%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	212.06%	201.98%	-10.08%	-5%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,378.14068	3,282.15097	(95.98971)	-3%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,437.60	\$3,061.46	(\$376.14)	-11%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$2,154.31	\$2,669.82	\$515.51	24%
21	MEDICARE - MEDICAID OP PMT / OPED	\$1,794.51	\$1,264.74	(\$529.78)	-30%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,062,117	\$4,151,059	(\$1,911,058)	-32%
	<u>MEDICAID TOTALS (INPATIENT + OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$67,117,976	\$71,804,797	\$4,686,821	7%
24	TOTAL ACCRUED PAYMENTS	\$18,244,907	\$16,331,851	(\$1,913,056)	-10%
25	TOTAL ALLOWANCES	\$48,873,069	\$55,472,946	\$6,599,877	14%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$9,342,979	\$8,263,237	(\$1,079,742)	-12%

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		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
E.	<u>OTHER MEDICAL ASSISTANCE (O.M.A.)</u>				
	<u>OTHER MEDICAL ASSISTANCE INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$0	\$0	\$0	0%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$0	\$0	\$0	0%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
4	DISCHARGES	-	-	-	0%
5	CASE MIX INDEX (CMI)	0.00000	0.00000	0.00000	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	0.00000	0.00000	0.00000	0%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$0.00	\$0.00	\$0.00	0%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$7,522.05	\$10,228.82	\$2,706.77	36%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$6,686.26	\$6,787.74	\$101.48	2%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
11	PATIENT DAYS	0	0	-	0%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$0.00	\$0.00	\$0.00	0%
13	AVERAGE LENGTH OF STAY	-	-	-	0%
	<u>OTHER MEDICAL ASSISTANCE OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$0	\$0	\$0	0%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$0	\$0	\$0	0%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	0.00%	0.00%	0.00%	0%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	0.00%	0.00%	0.00%	0%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	0.00000	0.00000	0.00000	0%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$0.00	\$0.00	\$0.00	0%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$5,591.91	\$5,731.28	\$139.38	2%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$5,232.11	\$4,326.20	(\$905.91)	-17%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$0	\$0	\$0	0%
	<u>OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$0	\$0	\$0	0%
24	TOTAL ACCRUED PAYMENTS	\$0	\$0	\$0	0%
25	TOTAL ALLOWANCES	\$0	\$0	\$0	0%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$0	\$0	\$0	0%

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LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
F.	<u>TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)</u>				
	<u>TOTAL MEDICAL ASSISTANCE INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$21,507,928	\$23,778,114	\$2,270,186	11%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$6,632,224	\$6,283,677	(\$348,547)	-5%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	30.84%	26.43%	-4.41%	-14%
4	DISCHARGES	1,593	1,625	32	2%
5	CASE MIX INDEX (CMI)	0.93070	0.94250	0.01180	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	1,482,60510	1,531,56250	48,95740	3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,473.36	\$4,102.79	(\$370.57)	-8%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$3,048.69	\$6,126.03	\$3,077.34	101%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,212.90	\$2,684.96	\$472.05	21%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,280,862	\$4,112,178	\$831,316	25%
11	PATIENT DAYS	5,653	6,109	456	8%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,173.22	\$1,028.59	(\$144.63)	-12%
13	AVERAGE LENGTH OF STAY	3.5	3.8	0.2	6%
	<u>TOTAL MEDICAL ASSISTANCE OUTPATIENT</u>				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$45,610,048	\$48,026,683	\$2,416,635	5%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$11,612,683	\$10,048,174	(\$1,564,509)	-13%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	25.46%	20.92%	-4.54%	-18%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	212.06%	201.98%	-10.08%	-5%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	3,378.14068	3,282.15097	(95.98971)	-3%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,437.60	\$3,061.46	(\$376.14)	-11%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$2,154.31	\$2,669.82	\$515.51	24%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$1,794.51	\$1,264.74	(\$529.78)	-30%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,062,117	\$4,151,059	(\$1,911,058)	-32%
	<u>TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)</u>				
23	TOTAL ACCRUED CHARGES	\$67,117,976	\$71,804,797	\$4,686,821	7%
24	TOTAL ACCRUED PAYMENTS	\$18,244,907	\$16,331,851	(\$1,913,056)	-10%
25	TOTAL ALLOWANCES	\$48,873,069	\$55,472,946	\$6,599,877	14%

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LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
G.	<u>CHAMPUS / TRICARE</u>				
	<u>CHAMPUS / TRICARE INPATIENT</u>				
1	INPATIENT ACCRUED CHARGES	\$352,195	\$269,030	(\$83,165)	-24%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$145,385	\$67,500	(\$77,885)	-54%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	41.28%	25.09%	-16.19%	-39%
4	DISCHARGES	25	25	0	0%
5	CASE MIX INDEX (CMI)	1.16130	0.73570	(0.42560)	-37%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	29.03250	18.39250	(10.64000)	-37%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$5,007.66	\$3,669.97	(\$1,337.69)	-27%
8	PATIENT DAYS	81	65	(16)	-20%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,794.88	\$1,038.46	(\$756.42)	-42%
10	AVERAGE LENGTH OF STAY	3.2	2.6	(0.6)	-20%
	<u>CHAMPUS / TRICARE OUTPATIENT</u>				
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$666,145	\$537,685	(\$128,460)	-19%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$132,563	\$151,700	\$19,137	14%
	<u>CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)</u>				
13	TOTAL ACCRUED CHARGES	\$1,018,340	\$806,715	(\$211,625)	-21%
14	TOTAL ACCRUED PAYMENTS	\$277,948	\$219,200	(\$58,748)	-21%
15	TOTAL ALLOWANCES	\$740,392	\$587,515	(\$152,877)	-21%
H.	<u>OTHER DATA</u>				
1	OTHER OPERATING REVENUE	\$6,100,777	\$5,173,982	(\$926,795)	-15%
2	TOTAL OPERATING EXPENSES	\$131,894,527	\$134,486,303	\$2,591,776	2%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$0	\$0	\$0	0%
	<u>COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)</u>				
4	CHARITY CARE (CHARGES)	\$223,751	\$3,781,958	\$3,558,207	1590%
5	BAD DEBTS (CHARGES)	\$9,847,024	\$6,470,291	(\$3,376,733)	-34%
6	UNCOMPENSATED CARE (CHARGES)	\$10,070,775	\$10,252,249	\$181,474	2%
7	COST OF UNCOMPENSATED CARE	\$3,437,666	\$3,359,900	(\$77,766)	-2%
	<u>TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)</u>				
8	TOTAL ACCRUED CHARGES	\$67,117,976	\$71,804,797	\$4,686,821	7%
9	TOTAL ACCRUED PAYMENTS	\$18,244,907	\$16,331,851	(\$1,913,056)	-10%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$22,910,766	\$23,532,100	\$621,335	3%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$4,665,859	\$7,200,249	\$2,534,391	54%

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FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
II.	<u>AGGREGATE DATA</u>				
A.	<u>TOTALS - ALL PAYERS</u>				
1	TOTAL INPATIENT CHARGES	\$131,648,635	\$142,677,758	\$11,029,123	8%
2	TOTAL INPATIENT PAYMENTS	\$52,974,162	\$61,000,511	\$8,026,349	15%
3	TOTAL INPATIENT PAYMENTS / CHARGES	40.24%	42.75%	2.51%	6%
4	TOTAL DISCHARGES	7,316	7,565	249	3%
5	TOTAL CASE MIX INDEX	1.11238	1.11715	0.00477	0%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	8,138,20480	8,451,24900	313,04420	4%
7	TOTAL OUTPATIENT CHARGES	\$213,396,856	\$243,235,287	\$29,838,431	14%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	162.10%	170.48%	8.38%	5%
9	TOTAL OUTPATIENT PAYMENTS	\$62,691,694	\$63,109,826	\$418,132	1%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	29.38%	25.95%	-3.43%	-12%
11	TOTAL CHARGES	\$345,045,491	\$385,913,045	\$40,867,554	12%
12	TOTAL PAYMENTS	\$115,665,856	\$124,110,337	\$8,444,481	7%
13	TOTAL PAYMENTS / TOTAL CHARGES	33.52%	32.16%	-1.36%	-4%
14	PATIENT DAYS	28,670	29,383	713	2%
B.	<u>TOTALS - ALL GOVERNMENT PAYERS</u>				
1	INPATIENT CHARGES	\$95,183,061	\$103,164,955	\$7,981,894	8%
2	INPATIENT PAYMENTS	\$35,968,005	\$37,799,300	\$1,831,295	5%
3	GOVT. INPATIENT PAYMENTS / CHARGES	37.79%	36.64%	-1.15%	-3%
4	DISCHARGES	4,996	5,215	219	4%
5	CASE MIX INDEX	1.17641	1.18562	0.00921	1%
6	CASE MIX ADJUSTED DISCHARGES	5,877.36480	6,183.02900	305.66420	5%
7	OUTPATIENT CHARGES	\$120,450,585	\$140,708,386	\$20,257,801	17%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	126.55%	136.39%	9.85%	8%
9	OUTPATIENT PAYMENTS	\$29,624,548	\$28,162,042	(\$1,462,506)	-5%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	24.59%	20.01%	-4.58%	-19%
11	TOTAL CHARGES	\$215,633,646	\$243,873,341	\$28,239,695	13%
12	TOTAL PAYMENTS	\$65,592,553	\$65,961,342	\$368,789	1%
13	TOTAL PAYMENTS / CHARGES	30.42%	27.05%	-3.37%	-11%
14	PATIENT DAYS	21,384	22,093	709	3%
15	TOTAL GOVERNMENT DEDUCTIONS	\$150,041,093	\$177,911,999	\$27,870,906	19%
C.	<u>AVERAGE LENGTH OF STAY</u>				
1	MEDICARE	4.6	4.5	(0.2)	-4%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.1	3.1	(0.0)	-1%
3	UNINSURED	4.1	3.1	(1.0)	-25%
4	MEDICAID	3.5	3.8	0.2	6%
5	OTHER MEDICAL ASSISTANCE	-	-	-	0%
6	CHAMPUS / TRICARE	3.2	2.6	(0.6)	-20%
7	TOTAL AVERAGE LENGTH OF STAY	3.9	3.9	(0.0)	-1%

BRISTOL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2011	FY 2012	DIFFERENCE	DIFFERENCE
III.	<u>DATA USED IN BASELINE UNDERPAYMENT CALCULATION</u>				
1	TOTAL CHARGES	\$345,045,491	\$385,913,045	\$40,867,554	12%
2	TOTAL GOVERNMENT DEDUCTIONS	\$150,041,093	\$177,911,999	\$27,870,906	19%
3	UNCOMPENSATED CARE	\$10,070,775	\$10,252,249	\$181,474	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$64,377,873	\$67,201,429	\$2,823,556	4%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$2,774,243	\$4,074,697	\$1,300,454	47%
6	TOTAL ADJUSTMENTS	\$227,263,984	\$259,440,374	\$32,176,390	14%
7	TOTAL ACCRUED PAYMENTS	\$117,781,507	\$126,472,671	\$8,691,164	7%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$117,781,507	\$126,472,671	\$8,691,164	7%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3413506627	0.3277232336	(0.0136274290)	-4%
11	COST OF UNCOMPENSATED CARE	\$3,437,666	\$3,359,900	(\$77,766)	-2%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$4,665,859	\$7,200,249	\$2,534,391	54%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$8,103,524	\$10,560,149	\$2,456,625	30%
IV.	<u>CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)</u>				
1	MEDICAID	\$6,062,117	\$4,151,059	(\$1,911,058)	-32%
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0	0%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,180,011	\$2,396,342	\$1,216,331	103%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$7,242,128	\$6,547,401	(\$694,727)	-10%
V.	<u>DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600</u>				
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$4,277,938	\$6,283,264	\$2,005,326	46.88%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$10,275,104	\$6,250,607	(\$4,024,497)	-39.17%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$125,941,019	\$130,360,493	\$4,419,474	3.51%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP.AUDIT. FINANCIAL STATEMENTS	\$345,045,549	\$385,913,045	\$40,867,496	11.84%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$10,070,775	\$10,252,249	\$181,474	1.80%

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
I.	ACCRUED CHARGES AND PAYMENTS			
A.	INPATIENT ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$36,465,574	\$39,512,803	\$3,047,229
2	MEDICARE	\$73,322,938	79,117,811	\$5,794,873
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$21,507,928	23,778,114	\$2,270,186
4	MEDICAID	\$21,507,928	23,778,114	\$2,270,186
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$352,195	269,030	(\$83,165)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$814,154	1,720,349	\$906,195
	TOTAL INPATIENT GOVERNMENT CHARGES	\$95,183,061	\$103,164,955	\$7,981,894
	TOTAL INPATIENT CHARGES	\$131,648,635	\$142,677,758	\$11,029,123
B.	OUTPATIENT ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$92,946,271	\$102,526,901	\$9,580,630
2	MEDICARE	\$74,174,392	92,144,018	\$17,969,626
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$45,610,048	48,026,683	\$2,416,635
4	MEDICAID	\$45,610,048	48,026,683	\$2,416,635
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$666,145	537,685	(\$128,460)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$5,148,409	5,636,956	\$488,547
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$120,450,585	\$140,708,386	\$20,257,801
	TOTAL OUTPATIENT CHARGES	\$213,396,856	\$243,235,287	\$29,838,431
C.	TOTAL ACCRUED CHARGES			
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$129,411,845	\$142,039,704	\$12,627,859
2	TOTAL MEDICARE	\$147,497,330	\$171,261,829	\$23,764,499
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$67,117,976	\$71,804,797	\$4,686,821
4	TOTAL MEDICAID	\$67,117,976	\$71,804,797	\$4,686,821
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$1,018,340	\$806,715	(\$211,625)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$5,962,563	\$7,357,305	\$1,394,742
	TOTAL GOVERNMENT CHARGES	\$215,633,646	\$243,873,341	\$28,239,695
	TOTAL CHARGES	\$345,045,491	\$385,913,045	\$40,867,554
D.	INPATIENT ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$17,006,157	\$23,201,211	\$6,195,054
2	MEDICARE	\$29,190,396	31,448,123	\$2,257,727
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,632,224	6,283,677	(\$348,547)
4	MEDICAID	\$6,632,224	6,283,677	(\$348,547)
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$145,385	67,500	(\$77,885)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$20,077	13,248	(\$6,829)
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$35,968,005	\$37,799,300	\$1,831,295
	TOTAL INPATIENT PAYMENTS	\$52,974,162	\$61,000,511	\$8,026,349
E.	OUTPATIENT ACCRUED PAYMENTS			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$33,067,146	\$34,947,784	\$1,880,638
2	MEDICARE	\$17,879,302	17,962,168	\$82,866
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$11,612,683	10,048,174	(\$1,564,509)
4	MEDICAID	\$11,612,683	10,048,174	(\$1,564,509)
5	OTHER MEDICAL ASSISTANCE	\$0	0	\$0
6	CHAMPUS / TRICARE	\$132,563	151,700	\$19,137
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$267,960	36,556	(\$231,404)
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$29,624,548	\$28,162,042	(\$1,462,506)
	TOTAL OUTPATIENT PAYMENTS	\$62,691,694	\$63,109,826	\$418,132
F.	TOTAL ACCRUED PAYMENTS			
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$50,073,303	\$58,148,995	\$8,075,692
2	TOTAL MEDICARE	\$47,069,698	\$49,410,291	\$2,340,593
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$18,244,907	\$16,331,851	(\$1,913,056)
4	TOTAL MEDICAID	\$18,244,907	\$16,331,851	(\$1,913,056)
5	TOTAL OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
6	TOTAL CHAMPUS / TRICARE	\$277,948	\$219,200	(\$58,748)
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$288,037	\$49,804	(\$238,233)
	TOTAL GOVERNMENT PAYMENTS	\$65,592,553	\$65,961,342	\$368,789
	TOTAL PAYMENTS	\$115,665,856	\$124,110,337	\$8,444,481

BRISTOL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
II.	<u>PAYER MIX</u>			
A.	<u>INPATIENT PAYER MIX BASED ON ACCRUED CHARGES</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	10.57%	10.24%	-0.33%
2	MEDICARE	21.25%	20.50%	-0.75%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.23%	6.16%	-0.07%
4	MEDICAID	6.23%	6.16%	-0.07%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.10%	0.07%	-0.03%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.24%	0.45%	0.21%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	27.59%	26.73%	-0.85%
	TOTAL INPATIENT PAYER MIX	38.15%	36.97%	-1.18%
B.	<u>OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	26.94%	26.57%	-0.37%
2	MEDICARE	21.50%	23.88%	2.38%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	13.22%	12.44%	-0.77%
4	MEDICAID	13.22%	12.44%	-0.77%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.19%	0.14%	-0.05%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.49%	1.46%	-0.03%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	34.91%	36.46%	1.55%
	TOTAL OUTPATIENT PAYER MIX	61.85%	63.03%	1.18%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C.	<u>INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	14.70%	18.69%	3.99%
2	MEDICARE	25.24%	25.34%	0.10%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.73%	5.06%	-0.67%
4	MEDICAID	5.73%	5.06%	-0.67%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.13%	0.05%	-0.07%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.02%	0.01%	-0.01%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	31.10%	30.46%	-0.64%
	TOTAL INPATIENT PAYER MIX	45.80%	49.15%	3.35%
D.	<u>OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS</u>			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	28.59%	28.16%	-0.43%
2	MEDICARE	15.46%	14.47%	-0.98%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10.04%	8.10%	-1.94%
4	MEDICAID	10.04%	8.10%	-1.94%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	0.11%	0.12%	0.01%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.23%	0.03%	-0.20%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	25.61%	22.69%	-2.92%
	TOTAL OUTPATIENT PAYER MIX	54.20%	50.85%	-3.35%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,320	2,350	30
2	MEDICARE	3,378	3,565	187
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,593	1,625	32
4	MEDICAID	1,593	1,625	32
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	25	25	-
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	38	119	81
	TOTAL GOVERNMENT DISCHARGES	4,996	5,215	219
	TOTAL DISCHARGES	7,316	7,565	249
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	7,286	7,290	4
2	MEDICARE	15,650	15,919	269
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5,653	6,109	456
4	MEDICAID	5,653	6,109	456
5	OTHER MEDICAL ASSISTANCE	0	0	-
6	CHAMPUS / TRICARE	81	65	(16)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	157	370	213
	TOTAL GOVERNMENT PATIENT DAYS	21,384	22,093	709
	TOTAL PATIENT DAYS	28,670	29,383	713
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.1	3.1	(0.0)
2	MEDICARE	4.6	4.5	(0.2)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3.5	3.8	0.2
4	MEDICAID	3.5	3.8	0.2
5	OTHER MEDICAL ASSISTANCE	0.0	0.0	-
6	CHAMPUS / TRICARE	3.2	2.6	(0.6)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	4.1	3.1	(1.0)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.3	4.2	(0.0)
	TOTAL AVERAGE LENGTH OF STAY	3.9	3.9	(0.0)
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.97450	0.96520	(0.00930)
2	MEDICARE	1.29240	1.29960	0.00720
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.93070	0.94250	0.01180
4	MEDICAID	0.93070	0.94250	0.01180
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	1.16130	0.73570	(0.42560)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.82960	0.94000	0.11040
	TOTAL GOVERNMENT CASE MIX INDEX	1.17641	1.18562	0.00921
	TOTAL CASE MIX INDEX	1.11238	1.11715	0.00477
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$122,450,596	\$128,985,172	\$6,534,576
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$58,072,723	\$61,783,743	\$3,711,020
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$64,377,873	\$67,201,429	\$2,823,556
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	52.57%	52.10%	-0.47%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$4,277,938	\$6,283,264	\$2,005,326
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$2,774,243	\$4,074,697	\$1,300,454
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$0	\$0	\$0
8	CHARITY CARE	\$223,751	\$3,781,958	\$3,558,207
9	BAD DEBTS	\$9,847,024	\$6,470,291	(\$3,376,733)
10	TOTAL UNCOMPENSATED CARE	\$10,070,775	\$10,252,249	\$181,474
11	TOTAL OTHER OPERATING REVENUE	\$122,450,596	\$128,985,172	\$6,534,576
12	TOTAL OPERATING EXPENSES	\$131,894,527	\$134,486,303	\$2,591,776

BRISTOL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
A.	CASE MIX ADJUSTED DISCHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,260.84000	2,268.22000	7.38000
2	MEDICARE	4,365.72720	4,633.07400	267.34680
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,482.60510	1,531.56250	48.95740
4	MEDICAID	1,482.60510	1,531.56250	48.95740
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	29.03250	18.39250	(10.64000)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	31.52480	111.86000	80.33520
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	5,877.36480	6,183.02900	305.66420
	TOTAL CASE MIX ADJUSTED DISCHARGES	8,138.20480	8,451.24900	313.04420
B.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	5,913.39516	6,097.72527	184.33011
2	MEDICARE	3,417.22663	4,151.95289	734.72626
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	3,378.14068	3,282.15097	-95.98971
4	MEDICAID	3,378.14068	3,282.15097	-95.98971
5	OTHER MEDICAL ASSISTANCE	0.00000	0.00000	0.00000
6	CHAMPUS / TRICARE	47.28524	49.96515	2.67991
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	240.29796	389.91958	149.62163
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	6,842.65255	7,484.06901	641.41647
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	12,756.04770	13,581.79428	825.74658
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$7,522.05	\$10,228.82	\$2,706.77
2	MEDICARE	\$6,686.26	\$6,787.74	\$101.48
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,473.36	\$4,102.79	(\$370.57)
4	MEDICAID	\$4,473.36	\$4,102.79	(\$370.57)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$5,007.66	\$3,669.97	(\$1,337.69)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$636.86	\$118.43	(\$518.43)
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,119.75	\$6,113.40	(\$6.36)
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,509.32	\$7,217.93	\$708.61
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$5,591.91	\$5,731.28	\$139.38
2	MEDICARE	\$5,232.11	\$4,326.20	(\$905.91)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,437.60	\$3,061.46	(\$376.14)
4	MEDICAID	\$3,437.60	\$3,061.46	(\$376.14)
5	OTHER MEDICAL ASSISTANCE	\$0.00	\$0.00	\$0.00
6	CHAMPUS / TRICARE	\$2,803.48	\$3,036.12	\$232.64
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,115.12	\$93.75	(\$1,021.36)
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$4,329.40	\$3,762.93	(\$566.46)
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$4,914.66	\$4,646.65	(\$268.02)

BRISTOL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$6,062,117	\$4,151,059	(\$1,911,058)
2	OTHER MEDICAL ASSISTANCE	\$0	\$0	\$0
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,180,011	\$2,396,342	\$1,216,331
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$7,242,128	\$6,547,401	(\$694,727)
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$345,045,491	\$385,913,045	\$40,867,554
2	TOTAL GOVERNMENT DEDUCTIONS	\$150,041,093	\$177,911,999	\$27,870,906
3	UNCOMPENSATED CARE	\$10,070,775	\$10,252,249	\$181,474
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$64,377,873	\$67,201,429	\$2,823,556
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$2,774,243	\$4,074,697	\$1,300,454
6	TOTAL ADJUSTMENTS	\$227,263,984	\$259,440,374	\$32,176,390
7	TOTAL ACCRUED PAYMENTS	\$117,781,507	\$126,472,671	\$8,691,164
8	UCP DSH PAYMENTS (OHCA INPUT)	\$0	\$0	\$0
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$117,781,507	\$126,472,671	\$8,691,164
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.3413506627	0.3277232336	(0.0136274290)
11	COST OF UNCOMPENSATED CARE	\$3,437,666	\$3,359,900	(\$77,766)
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$4,665,859	\$7,200,249	\$2,534,391
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$8,103,524	\$10,560,149	\$2,456,625
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	46.64%	58.72%	12.08%
2	MEDICARE	39.81%	39.75%	-0.06%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	30.84%	26.43%	-4.41%
4	MEDICAID	30.84%	26.43%	-4.41%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	41.28%	25.09%	-16.19%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.47%	0.77%	-1.70%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	37.79%	36.64%	-1.15%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	40.24%	42.75%	2.51%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	35.58%	34.09%	-1.49%
2	MEDICARE	24.10%	19.49%	-4.61%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	25.46%	20.92%	-4.54%
4	MEDICAID	25.46%	20.92%	-4.54%
5	OTHER MEDICAL ASSISTANCE	0.00%	0.00%	0.00%
6	CHAMPUS / TRICARE	19.90%	28.21%	8.31%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5.20%	0.65%	-4.56%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	24.59%	20.01%	-4.58%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	29.38%	25.95%	-3.43%

BRISTOL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$115,665,856	\$124,110,337	\$8,444,481
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$115,665,856	\$124,110,337	\$8,444,481
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$10,275,104	\$6,250,607	(\$4,024,497)
4	CALCULATED NET REVENUE	\$125,940,960	\$130,360,944	\$4,419,984
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$125,941,019	\$130,360,493	\$4,419,474
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$59)	\$451	\$510
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$345,045,491	\$385,913,045	\$40,867,554
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$345,045,491	\$385,913,045	\$40,867,554
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$345,045,549	\$385,913,045	\$40,867,496
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$58)	\$0	\$58
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$10,070,775	\$10,252,249	\$181,474
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$10,070,775	\$10,252,249	\$181,474
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$10,070,775	\$10,252,249	\$181,474
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
I.	ACCRUED CHARGES AND PAYMENTS	
A.	INPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$39,512,803
2	MEDICARE	79,117,811
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	23,778,114
4	MEDICAID	23,778,114
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	269,030
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,720,349
	TOTAL INPATIENT GOVERNMENT CHARGES	\$103,164,955
	TOTAL INPATIENT CHARGES	\$142,677,758
B.	OUTPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$102,526,901
2	MEDICARE	92,144,018
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	48,026,683
4	MEDICAID	48,026,683
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	537,685
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	5,636,956
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$140,708,386
	TOTAL OUTPATIENT CHARGES	\$243,235,287
C.	TOTAL ACCRUED CHARGES	
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$142,039,704
2	TOTAL GOVERNMENT ACCRUED CHARGES	243,873,341
	TOTAL ACCRUED CHARGES	\$385,913,045
D.	INPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$23,201,211
2	MEDICARE	31,448,123
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,283,677
4	MEDICAID	6,283,677
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	67,500
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	13,248
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$37,799,300
	TOTAL INPATIENT PAYMENTS	\$61,000,511
E.	OUTPATIENT ACCRUED PAYMENTS	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$34,947,784
2	MEDICARE	17,962,168
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10,048,174
4	MEDICAID	10,048,174
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	151,700
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	36,556
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$28,162,042
	TOTAL OUTPATIENT PAYMENTS	\$63,109,826
F.	TOTAL ACCRUED PAYMENTS	
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$58,148,995
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	65,961,342
	TOTAL ACCRUED PAYMENTS	\$124,110,337

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
II.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
A.	ACCRUED DISCHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,350
2	MEDICARE	3,565
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1,625
4	MEDICAID	1,625
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	25
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	119
	TOTAL GOVERNMENT DISCHARGES	5,215
	TOTAL DISCHARGES	7,565
B.	CASE MIX INDEX	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	0.96520
2	MEDICARE	1.29960
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0.94250
4	MEDICAID	0.94250
5	OTHER MEDICAL ASSISTANCE	0.00000
6	CHAMPUS / TRICARE	0.73570
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.94000
	TOTAL GOVERNMENT CASE MIX INDEX	1.18562
	TOTAL CASE MIX INDEX	1.11715
C.	OTHER REQUIRED DATA	
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$128,985,172
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$61,783,743
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$67,201,429
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	52.10%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$6,283,264
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$4,074,697
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$3,781,958
9	BAD DEBTS	\$6,470,291
10	TOTAL UNCOMPENSATED CARE	\$10,252,249
11	TOTAL OTHER OPERATING REVENUE	\$5,173,982
12	TOTAL OPERATING EXPENSES	\$134,486,303

BRISTOL HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2012 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2012
III.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS	
A.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	TOTAL ACCRUED PAYMENTS	\$124,110,337
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$124,110,337
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$6,250,607
	CALCULATED NET REVENUE	\$130,360,944
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$130,360,493
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$451
B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$385,913,045
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$385,913,045
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$385,913,045
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$10,252,249
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$10,252,249
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$10,252,249
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

BRISTOL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2011	ACTUAL FY 2012	AMOUNT DIFFERENCE	% DIFFERENCE
A.	<u>Hospital Charity Care (from HRS Report 500)</u>				
1	Number of Applicants	82	3,402	3,320	4049%
2	Number of Approved Applicants	79	3,402	3,323	4206%
3	Total Charges (A)	\$223,751	\$3,781,958	\$3,558,207	1590%
4	Average Charges	\$2,832	\$1,112	(\$1,721)	-61%
5	Ratio of Cost to Charges (RCC)	0.357944	0.375611	0.017667	5%
6	Total Cost	\$80,090	\$1,420,545	\$1,340,455	1674%
7	Average Cost	\$1,014	\$418	(\$596)	-59%
8	Charity Care - Inpatient Charges	\$110,509	\$879,504	\$768,995	696%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	76,227	2,080,472	2,004,245	2629%
10	Charity Care - Emergency Department Charges	37,015	821,982	784,967	2121%
11	Total Charges (A)	\$223,751	\$3,781,958	\$3,558,207	1590%
12	Charity Care - Number of Patient Days	16	206	190	1188%
13	Charity Care - Number of Discharges	2	64	62	3100%
14	Charity Care - Number of Outpatient ED Visits	32	2,044	2,012	6288%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	62	1,173	1,111	1792%
B.	<u>Hospital Bad Debts (from HRS Report 500)</u>				
1	Bad Debts - Inpatient Services	\$2,727,226	\$1,972,481	(\$754,745)	-28%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	5,862,099	4,268,954	(1,593,145)	-27%
3	Bad Debts - Emergency Department	1,257,699	228,856	(1,028,843)	-82%
4	Total Bad Debts (A)	\$9,847,024	\$6,470,291	(\$3,376,733)	-34%
C.	<u>Hospital Uncompensated Care (from HRS Report 500)</u>				
1	Charity Care (A)	\$223,751	\$3,781,958	\$3,558,207	1590%
2	Bad Debts (A)	9,847,024	6,470,291	(3,376,733)	-34%
3	Total Uncompensated Care (A)	\$10,070,775	\$10,252,249	\$181,474	2%
4	Uncompensated Care - Inpatient Services	\$2,837,735	\$2,851,985	\$14,250	1%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	5,938,326	6,349,426	411,100	7%
6	Uncompensated Care - Emergency Department	1,294,714	1,050,838	(243,876)	-19%
7	Total Uncompensated Care (A)	\$10,070,775	\$10,252,249	\$181,474	2%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

BRISTOL HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2012					
REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES,					
ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2011	FY 2012		
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
LINE	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
	<u>COMMERCIAL - ALL PAYERS</u>				
1	Total Gross Revenue	\$122,450,596	\$128,985,172	\$6,534,576	5%
2	Total Contractual Allowances	\$64,377,873	\$67,201,429	\$2,823,556	4%
	Total Accrued Payments (A)	\$58,072,723	\$61,783,743	\$3,711,020	6%
	Total Discount Percentage	52.57%	52.10%	-0.47%	-1%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

BRISTOL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2010</u>	<u>ACTUAL FY 2011</u>	<u>ACTUAL FY 2012</u>
A.	<u>Gross and Net Revenue</u>			
1	Inpatient Gross Revenue	\$146,231,302	\$131,648,635	\$142,677,758
2	Outpatient Gross Revenue	\$215,529,941	\$213,396,856	\$243,235,287
3	Total Gross Patient Revenue	\$361,761,243	\$345,045,491	\$385,913,045
4	Net Patient Revenue	\$127,394,892	\$125,941,019	\$130,360,493
B.	<u>Total Operating Expenses</u>			
1	Total Operating Expense	\$130,987,633	\$131,894,527	\$134,486,303
C.	<u>Utilization Statistics</u>			
1	Patient Days	30,673	28,670	29,383
2	Discharges	7,617	7,316	7,565
3	Average Length of Stay	4.0	3.9	3.9
4	Equivalent (Adjusted) Patient Days (EPD)	75,882	75,143	79,475
0	Equivalent (Adjusted) Discharges (ED)	18,844	19,175	20,462
D.	<u>Case Mix Statistics</u>			
1	Case Mix Index	1.08086	1.11238	1.11715
2	Case Mix Adjusted Patient Days (CMAPD)	33,153	31,892	32,825
3	Case Mix Adjusted Discharges (CMAD)	8,233	8,138	8,451
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	82,018	83,588	88,785
5	Case Mix Adjusted Equivalent Discharges (CMAED)	20,367	21,330	22,859
E.	<u>Gross Revenue Per Statistic</u>			
1	Total Gross Revenue per Patient Day	\$11,794	\$12,035	\$13,134
2	Total Gross Revenue per Discharge	\$47,494	\$47,163	\$51,013
3	Total Gross Revenue per EPD	\$4,767	\$4,592	\$4,856
4	Total Gross Revenue per ED	\$19,198	\$17,995	\$18,860
5	Total Gross Revenue per CMAEPD	\$4,411	\$4,128	\$4,347
6	Total Gross Revenue per CMAED	\$17,762	\$16,177	\$16,882
7	Inpatient Gross Revenue per EPD	\$1,927	\$1,752	\$1,795
8	Inpatient Gross Revenue per ED	\$7,760	\$6,866	\$6,973

BRISTOL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2010</u>	<u>ACTUAL FY 2011</u>	<u>ACTUAL FY 2012</u>
F.	<u>Net Revenue Per Statistic</u>			
1	Net Patient Revenue per Patient Day	\$4,153	\$4,393	\$4,437
2	Net Patient Revenue per Discharge	\$16,725	\$17,214	\$17,232
3	Net Patient Revenue per EPD	\$1,679	\$1,676	\$1,640
4	Net Patient Revenue per ED	\$6,761	\$6,568	\$6,371
5	Net Patient Revenue per CMAEPD	\$1,553	\$1,507	\$1,468
6	Net Patient Revenue per CMAED	\$6,255	\$5,904	\$5,703
G.	<u>Operating Expense Per Statistic</u>			
1	Total Operating Expense per Patient Day	\$4,270	\$4,600	\$4,577
2	Total Operating Expense per Discharge	\$17,197	\$18,028	\$17,777
3	Total Operating Expense per EPD	\$1,726	\$1,755	\$1,692
4	Total Operating Expense per ED	\$6,951	\$6,878	\$6,573
5	Total Operating Expense per CMAEPD	\$1,597	\$1,578	\$1,515
6	Total Operating Expense per CMAED	\$6,431	\$6,184	\$5,883
H.	<u>Nursing Salary and Fringe Benefits Expense</u>			
1	Nursing Salary Expense	\$20,662,698	\$20,534,294	\$20,544,785
2	Nursing Fringe Benefits Expense	\$6,166,989	\$6,098,801	\$5,639,912
3	Total Nursing Salary and Fringe Benefits Expense	\$26,829,687	\$26,633,095	\$26,184,697
I.	<u>Physician Salary and Fringe Expense</u>			
1	Physician Salary Expense	\$365,058	\$427,269	\$320,735
2	Physician Fringe Benefits Expense	\$108,955	\$126,901	\$88,048
3	Total Physician Salary and Fringe Benefits Expense	\$474,013	\$554,170	\$408,783
J.	<u>Non-Nursing, Non-Physician Salary and Fringe Benefits Expense</u>			
1	Non-Nursing, Non-Physician Salary Expense	\$30,445,437	\$32,130,283	\$34,060,540
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$9,086,746	\$9,542,875	\$9,350,229
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$39,532,183	\$41,673,158	\$43,410,769
K.	<u>Total Salary and Fringe Benefits Expense</u>			
1	Total Salary Expense	\$51,473,193	\$53,091,846	\$54,926,060
2	Total Fringe Benefits Expense	\$15,362,690	\$15,768,577	\$15,078,189
3	Total Salary and Fringe Benefits Expense	\$66,835,883	\$68,860,423	\$70,004,249

BRISTOL HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2012				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL FY 2010</u>	<u>ACTUAL FY 2011</u>	<u>ACTUAL FY 2012</u>
L.	<u>Total Full Time Equivalent Employees (FTEs)</u>			
1	Total Nursing FTEs	283.4	278.2	281.4
2	Total Physician FTEs	2.5	1.9	1.4
3	Total Non-Nursing, Non-Physician FTEs	587.4	580.7	580.9
4	Total Full Time Equivalent Employees (FTEs)	873.3	860.8	863.7
M.	<u>Nursing Salaries and Fringe Benefits Expense per FTE</u>			
1	Nursing Salary Expense per FTE	\$72,910	\$73,811	\$73,009
2	Nursing Fringe Benefits Expense per FTE	\$21,761	\$21,922	\$20,042
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$94,671	\$95,734	\$93,052
N.	<u>Physician Salary and Fringe Expense per FTE</u>			
1	Physician Salary Expense per FTE	\$146,023	\$224,878	\$229,096
2	Physician Fringe Benefits Expense per FTE	\$43,582	\$66,790	\$62,891
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$189,605	\$291,668	\$291,988
O.	<u>Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE</u>			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$51,831	\$55,330	\$58,634
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$15,469	\$16,433	\$16,096
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$67,300	\$71,764	\$74,730
P.	<u>Total Salary and Fringe Benefits Expense per FTE</u>			
1	Total Salary Expense per FTE	\$58,941	\$61,677	\$63,594
2	Total Fringe Benefits Expense per FTE	\$17,592	\$18,319	\$17,458
3	Total Salary and Fringe Benefits Expense per FTE	\$76,533	\$79,996	\$81,052
Q.	<u>Total Salary and Fringe Ben. Expense per Statistic</u>			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$2,179	\$2,402	\$2,382
2	Total Salary and Fringe Benefits Expense per Discharge	\$8,775	\$9,412	\$9,254
3	Total Salary and Fringe Benefits Expense per EPD	\$881	\$916	\$881
4	Total Salary and Fringe Benefits Expense per ED	\$3,547	\$3,591	\$3,421
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$815	\$824	\$788
6	Total Salary and Fringe Benefits Expense per CMAED	\$3,282	\$3,228	\$3,062